

ANN. REP  
WLM 28  
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H65  
1937-38

C. & S. 600. 4/7/1938.

104.  
C.P. \_\_\_\_\_  
1938-1939.



THIRTY-NINTH  
ANNUAL REPORT  
OF  
HILL END HOSPITAL  
AND CLINIC

For the Prevention and Treatment  
of Mental and Nervous Disorders

*For the Year ended 31st March, 1938*

WITH

**STATISTICAL TABLES**

*For the Year ended 31st December, 1937.*

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## THE VISITING COMMITTEE.

§ || ‡ † THE REV. ROLAND SMITH, *Chairman*.

‡    W. BIRD, ESQ.	* MRS. M. C. FLEMING
† A. F. BOTT, ESQ.	* H. FLETCHER, ESQ.
‡ MISS E. E. R. BRADFORD.	* E. J. FRANKLIN, ESQ.
† * ADMIRAL SIR LEWIS CLINTON- BAKER, <i>K.C.B., K.C.V.O., C.B.E.</i>	C. E. GRIFFIN, ESQ.
† * D. CRAWFORD, ESQ., <i>M.B.E.</i>	N. E. KELLY, ESQ.
‡ H. E. CURTIS, ESQ.	* A. H. ROSS, ESQ., <i>C.B.E.</i>
* J. DIMMOCK, ESQ.	G. W. RUSSELL, ESQ.
SIR LIONEL FAUDEL-	† W. STACEY, ESQ.
PHILLIPS, BART.	† * S. WALLACE, ESQ.
	‡ MRS. A. E. WHEELWRIGHT

† Members of the Farm and Emergency Sub-Committee.

\* Members of the Tenders Sub-Committee.

‡ Members of the Discharges Sub-Committee.

|| Members of the Buildings Sub-Committee.

§ Member on Selection Committee, Herts County Council.

## CLINIC SUB-COMMITTEE.

MISS E. E. R. BRADFORD.	MRS. M. C. FLEMING.
H. E. CURTIS, ESQ.	REV. ROLAND SMITH.
SIR LIONEL FAUDEL-PHILLIPS, BART.	W. STACEY, ESQ.
Representative of :	
...	County Education Committee.
G. ROLLO WALKER, ESQ. ...	Maternity and Child Welfare Committee.
SIR OWEN WIGHTMAN, C.B.E.	County Probation Committee.

## OFFICERS OF THE COMMITTEE.

<i>Clerk to Visiting Committee...</i>	ELTON LONGMORE.
<i>Deputy Clerk to Visiting Committee</i> ... ..	PHILIP R. LONGMORE <i>O.B.E.</i>
<i>Treasurers</i> ... ..	BARCLAYS BANK LTD., St. Albans.
<i>Accountant</i> ... ..	W. B. KEEN.

Telegrams :—Hill End Hospital, St. Albans. Telephone :—St. Albans 52 & 53.

Stations :—Hill End, L. & N.E.R. (G.N. Section), adjoining.

„ St. Albans (City) L.M.S. (1½ miles).

„ „ (Abbey) L.M.S. (L. & N.W.R. Section), (2½ miles).

# HILL END HOSPITAL AND CLINIC.

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**Medical Director** ... ... W. J. T. KIMBER, M.R.C.S.,  
L.R.C.P., D.P.M.

## Medical Staff (Hospital.)

*Deputy Medical Director* E. D. T. ROBERTS, M.R.C.S.,  
L.R.C.P., D.P.M.

*Assistant Medical Officers* C. K. BUSHE, O.B.E., B.A., DUB.,  
M.D., B.Ch., B.A.O.

KATHLEEN M. WEBSTER, M.R.C.S.,  
L.R.C.P.

F. R. C. CASSON, M.B., B.S.,  
M.R.C.S., L.R.C.P.

*Pathologists* ... ... A. MARGARET McGRATH, B.A., M.B.,  
B.S., LOND., M.R.C.S., L.R.C.P.,  
D.P.M.

F. E. CAMPS, M.D., LOND., M.R.C.S.,  
L.R.C.P., D.T.M. & H., LIVPL.

*House Physicians* ... ... MARGARET M. METHVEN, M.A.,  
M.B., CH. B., EDIN.,  
(appointed 5th March, 1937.)  
N. C. HORNE, M.R.C.S., L.R.C.P.  
(appointed 8th January, 1938.)

## Medical Staff (Clinic.)

*Assistant Medical Director* ... J. F. LOVEL BARNES, M.A.,  
M.R.C.S., L.R.C.P.

*Psycho-therapists* ... ... ROSALIE E. LUCAS, M.B., B.Ch.,  
M.R.C.S., L.R.C.P., LOND.

KATHLEEN M. TODD, M.B., CH.B.,  
D.P.M.

ROSALIND VACHER, M.B., CH.B.,  
D.P.M.

ELEANOR M. CREAK, M.D.,  
M.R.C.P., D.P.M.

W. H. GILLESPIE, M.D., M.R.C.P.

*Psychologists* ... ... MISS K. M. DUGUID, Diplom. Inst.  
des. Sci. de L'Educat. Geneve.

MRS. E. NORMAN, M.A.

MARTIN DAWSON, B.Sc., (E.CON).

### Medical Staff (Consulting and Specialist.)

<i>Consulting Surgeon</i>	...	D. S. MORGAN JONES, F.R.C.S., ED., L.R.C.P., LOND.
<i>Surgeon, Ear, Nose and Throat Dept.</i>	... ..	T. B. LAYTON, D.S.O., M.S., LOND., F.R.C.S., ENG.
<i>Ophthalmic Surgeon</i>	...	G. W. KENDALL, M.D., DUB., B.CH., B.A.O.
<i>Dental Surgeon</i>	... ..	ARTHUR H. J. MILLER, L.D.S., R.C.S., ENG.

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### Social Service Department.

<i>Psychiatric Social Worker</i>	...	MISS E. M. FINDLAY, A.I.H.A.
<i>Assistant Psychiatric Social Workers</i>	... ..	MISS D. M. HUTCHINSON, M.A., CANTAB., MENT. HLTH CERT.  MISS M. GOLDBERG, SOC. SCIENCE CERT., MENT. HLTH. CERT.  MISS P. M. PERROTT, SOC. SCIENCE CERT., MENT. HLTH. CERT.
<i>Secretary</i>	... ..	MISS A. B. BRERETON.

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<i>Chaplains: Church of England</i>	...	REV. CANON A. J. BARFF, B.A.
<i>Free Church</i>	...	REV. W. M. BARWELL, M.A.
<i>Roman Catholic</i>	...	REV. C. GOUFFE, M.S.C.
<i>Controller</i>	... ..	S. E. SHEPPARD, M.C.S.A.
<i>Clerk of the Hospital</i>	...	O. PELLANT.
<i>Matron</i>	... ..	MISS C. CONNOR, S.R.N., R.M.N.
<i>Head Male Nurse</i>	...	J. BAKER, R.M.N.

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### Honorary Librarians.

E. W. BLACKLER, ESQ.	MISS S. HOWARD.
F. J. HARWOOD, ESQ., O.B.E.	MISS. L. SLATER.
R. W. INGRAM, ESQ.	



# Thirty-ninth Annual Report of the Visiting Committee.

*Presented to the County Council at their Meeting held at the Shire Hall, Hertford, on the 18th day of July, 1938.*

## Annual Report.

1. In Accordance with Section 190 of "The Lunacy Act, 1890," the Visiting Committee present their Report for the year ended 31st March, 1938.

## Accommodation.

2. The total number of beds owned by Hertfordshire on the 31st December, 1937, was as follows :—

		MALES.	FEMALES.	TOTAL.
At Hill End	...	454	778	1232
At Arlesey	...	116	144	260
		<hr/>	<hr/>	<hr/>
Total	...	570	922	1492
		<hr/>	<hr/>	<hr/>

3. The patients chargeable to Hertfordshire were, on 31st December, 1937, distributed as follows :—

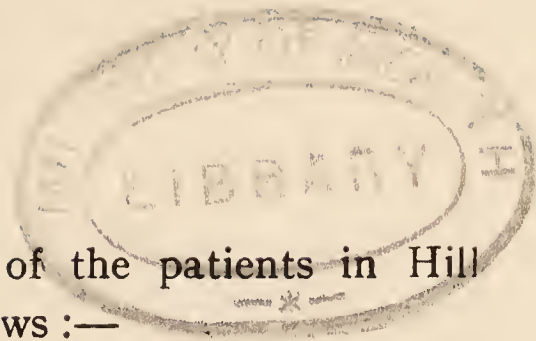
		MALES.	FEMALES.	TOTAL.
At Hill End	...	364	718	1082
At Arlesey	...	112	107	219
		<hr/>	<hr/>	<hr/>
Total	...	476	825	1301
		<hr/>	<hr/>	<hr/>

4. The above figures show that on 31st December, 1937, there was at the two Hospitals an excess of beds, as far as Hertfordshire patients are concerned, of 94 for males and 97 for females. Not all these patients are chargeable to the County directly but some are service or private patients for whom, in most cases, no other accommodation is available.

5. During the year 1937, the number of Hertfordshire patients increased by thirty-seven males and forty-two females.

The number of service patients remaining at the end of the year was thirty-four, a decrease from thirty-five of one patient. Three men at Hill End are classified as "Ex-Service patients."





## Patients—Hill End.

6. The numbers and chargeability of the patients in Hill End on 31st December, 1937, were as follows :—

	M.	F.	T.
Herts Areas and County of Hertford ...	364	718	1082
Out-County Areas ... ..	8	14	22
Private Patients ... ..	8	43	51
Service „ ... ..	34	—	34
Ex-Service „ ... ..	3	—	3
Criminal Patients ... ..	1	—	1
Total ... ..	418	775	1193

## Maintenance Rate.

7. A Maintenance Rate of 28s. 0d. was charged from the 1st April, 1937, to the 31st December, 1937, and 29s. 2d. from 1st January, 1938, to 31st March, 1938, for “Patients chargeable to Areas in the County,” and for “Private Pensions” Patients.

For Patients belonging to other Counties and Criminal Lunatics the charge made is usually 5s. 3d. per week more than the In-County rate.

For “Private” Patients charges varying from the usual Maintenance Rate given above to three guineas per week have been made.

For “Service” and “Ex-Service” Patients the charge was 28s. 0d. from 1st April, 1937, to the 31st December 1937, and 29s. 2d. from 1st January, 1938, to 31st March, 1938, plus 3s. 9d per week.

## Additions and Alterations.

8. The following additions and alterations amounting to £54. 14s. 3d., were made under Section 266 (1) of “The Lunacy Act, 1890,” during the year :—

	£.	s.	d.
Shed for Auto Truck ... ..	41	14	9
Water Supply to Farm Field ... ..	12	19	6
	£54	14	3

## Building and Repairs Fund Account.

9. The following payments have been made out of moneys standing to the credit of the Building and Repairs Fund :—

	£.	s.	d.
Converting Highfield Cottage into three Cottages for Farm Hands ... ..	351	3	10
Alterations to Medical Officers’ Quarters ... ..	37	11	0
Alterations to Medical Director’s House ... ..	180	16	5
Installation of Electric Light in Home Farm Buildings, etc. ... ..	278	8	9
Repairing and Erecting Wooden Hut as Tennis Pavilion, etc. ... ..	70	8	0
Lathe and Bench Grinder, etc. ... ..	179	18	0
General Rates, Income Tax, etc. ... ..	685	9	3
Making good Drives, Gardens, etc., after Contractors	44	3	6
	£1827	18	9

## New Buildings and Extraordinary Outlay.

10. There has been expenditure under this heading during the year as follows :—

	£.	s.	d.
Enlargement of Hill End Hospital and Clinic ...	7017	10	9
Laying out of Garden Courts ... ..	20	14	8
Furnishing Account ... ..	361	3	5
Erection of Twenty-six pairs Staff Cottages ...	1644	3	9
Erection of New Laundry and Equipment ...	138	15	7
Construction of Fuel Bunkers ... ..	353	16	10
Erection of New Piggeries at Home Farm ...	94	0	0
Highfield Farm Sewage Disposal ... ..	95	12	5
Standby Generating Set ... ..	1016	3	3
Erection of Male Admission Unit ... ..	154	5	10
	<u>£10896</u>	<u>6</u>	<u>6</u>

## Rating Assessment.

11. The Assessment for Rates upon the Hospital, its Buildings and Land is as follows :—

	Nett.
Upon the Hospital Estate and Buildings ...	£10073
Highfield Hall ... ..	172
Nurses' Home ... ..	559
Pumping Station ... ..	500
Sewage Works ... ..	500
Medical Director's House ... ..	48
Senior A.M.O's. House (Hillside) ...	52
A.M.O's House (The Shrubbery) ...	44
Controller's House ... ..	48
Steward's House ... ..	48
Steward's House (Cell Barnes)... ..	36
Engineer in Charge House ... ..	36
Twenty-seven Staff Cottages on Hos- pital Estate ... ..	328
Eighteen Staff Cottages in Wellington and Cambridge Roads ... ..	324
Three Roseneath Cottages, Cambridge Road ... ..	40
Sixty Staff Cottages, Beastney Estate	1080
Two Staff Cottages, Home Farm ...	36
" " " " (New)	36
Two Staff Cottages, Highfield Farm	36
" " " " (New)	36
Hill End Farm House ... ..	26
Three Highfield Cottages ... ..	36
" " " " (New) ... ..	45
Rochdale Cottage ... ..	17
	<u>£14156</u>

## Insurance.

12. The Hospital Buildings, including outbuildings, furniture, stock, etc., Nurses' Home, Highfield Hall, Officers' Houses, Farms and Staff Cottages, are insured against fire, etc., for the sum of £756,148 with the Alliance Assurance Co., Ltd.

A Comprehensive Policy, covering the "Morris" Box Motor Van, and a Third Party Policy in respect of the "Bedford" Truck are in force with the Alliance Assurance Company, Ltd.



The Steam Boilers, Producers, and the Engineering Plant at the Hospital, including plant for joint services for Hill End and Cell Barnes Colony, and Laundry Machinery have been insured with the National Boiler and General Insurance Company, Ltd., for the total sum of £80,355.

Money in transit between the Bank and the Clerk's office has been insured for the estimated amount during the year of £38,500 with the Alliance Assurance Company, Ltd.

**Mr. Lionel Henry Peacock and Mr. Thomas Richard Grimwood. (Late Members of the Visiting Committee).**

13. It is with the deepest regret that the Committee have to report the death of two of its members during the year under review. The death of Mr. L. H. Peacock, which took place on the 21st May, 1937, and that of Mr. T. R. Grimwood on the 9th June, 1937.

Mr. Peacock joined the Visiting Committee in 1931 and Mr. Grimwood as long ago as 1907; both have devoted much time and energy to the administration of the Hospital and to the welfare of the Patients and Staff. The loss of two such able colleagues has been greatly felt.

**State of the Hospital.**

The Hospital Buildings generally are in a very good state of repair. Internal decorations have been completed except one or two sections, such as the Recreation Hall, for which special arrangements will have to be made, owing to the limited period during which it is not in use.

Pointing and repairs to chimney stacks, etc., is in progress.

External painting is in progress.

The Cottage, Highfield Hall, has been converted into three cottages for the occupation of Farm Hands.

Rooms previously used as Staff Bedrooms have been adapted and converted into Quarters for the Female Medical Staff. The rooms in question were situated in the rear of the original Medical Officers' Quarters and the opening up of the rooms has very greatly added to the amenities of the block as a whole.

Additional office accommodation for the Medical Staff has been met by dividing off a portion of the new waiting room in the front Entrance Block.

A Cycle Shed has been erected for Staff use.

The Verandahs of Wards M.A. I. and F.A. I. have been replaced with Verandahs of a much improved type.

The Medical Director's House has been enlarged.

The Farm Bailiff's House, Farm Block and the whole of the Farm Buildings have been fitted throughout with electric light.

### **Acreage of the Hospital Estate.**

15. The Estate at the commencement of the year comprised about 589½ acres.

The surface level at the Main Entrance to the Hospital is 290 feet about Ordnance Datum.

### **Hospital Buildings for Staff and Patients.**

16. The Annexe for eighteen male patients has now been completed and is ready for occupation when required.

The Fuel Bunkers have been completed, with the exception of the installation of a Conveyor, the question of which remains in abeyance.

Plans have been prepared and approved by the Board of Control for the erection of a single storey Admission Unit for twenty-seven male patients on a site near the Male Annexe referred to above.

### **Asylums Officers' Superannuation Act, 1909.**

17. The following have retired and Superannuation Allowances have been awarded as follows :—

					£	s.	d.
Herbert Brown	...	after 21 years' service	...		66	8	9
Alice Naseby	...	„ 18 „ „	...		48	6	9
Ernest John Hayward	...	„ 40 „ „	...		166	15	10
Lizzie Neve	...	„ 37 „ „	...		164	18	5
Herbert Way	...	„ 33 „ „	...		124	9	8
Allan Runchman	...	„ 18 „ „	...		70	0	0

### **Pensions (Increase) Act, 1924.**

18. This Act and Treasury Regulations, dated the 9th October, 1924, and amending Regulations, dated the 10th November, 1931, no longer apply, the one pensioner affected having died.

### **National Health Insurance Acts.**

19. Two Disablement Allowances have been granted under the Certificate of Exception from the provisions of the National



Health Insurance Acts, during the year, and three Disablement Allowances have been discontinued, owing to the recipients having recovered normal health.

### **Unemployment Insurance Acts.**

20. A Certificate of Exception has been granted by the Minister of Labour to the Visiting Committee, under paragraph (d) (as amended) of Part II. of the First Schedule to the Unemployment Insurance Act, 1920, in respect of persons in their employ whose employment is permanent in character, for a period ending 6th July, 1941.

### **Widows', Orphans', and Old Age Contributory Pensions Act, 1925.**

21. A Certificate of Exception for Established Employees as to Old Age Pensions under proviso (C.) to Sub-Section (1) of Section 9 of this Act, has been granted to the Committee.

### **Visits.**

22. Two Commissioners of the Board of Control visited Hill End on the 19th and 20th January, 1938. The Report is printed on pages 40—44.

An Inspector of the Ministry of Pensions visited on the 9th November, 1937.

### **Auditor's Report.**

23. The District Auditor has audited the Accounts for the financial year ended 31st March, 1937, and found them to be correct.

### **Accounts.**

24. In accordance with the provisions of Section 173 of "The Lunacy Act, 1890," the accounts of the Treasurers and Clerk for the year ended 31st March, 1938, have been examined by the Committee, and are submitted herewith (page 57), together with a comparative statement as to the average weekly cost per head during the past year (page 67).

### **Clinic.**

25. It must be pointed out that No Expenditure upon the Clinic is borne by the Hospital Maintenance Rate, but is met direct from the County funds.

ROLAND SMITH,  
*Chairman.*

24th May, 1938.

# HILL END HOSPITAL AND CLINIC.

## Report of the Medical Director.

TO THE CHAIRMAN AND MEMBERS OF THE VISITING COMMITTEE.

26. The character of the Institution now known as Hill End Hospital and Clinic has since the war, and more particularly during the last ten years, changed considerably, and in submitting the Thirty-ninth Annual Report of the Medical Director, I should like to emphasise this by drawing attention to the fact that of the numbers of patients coming for treatment, apart from transfers from other Mental Hospitals, out of a total of 519 new patients in 1937, only 181 were sent under any form of judicial order, the remainder, by far the larger number, 338, were treated apart from this, 157 as in-patients and 181 as out-patients at the Clinic. The Child Guidance Unit is being used to an increasing extent and 90 new cases of children under sixteen years of age were referred.

### HOSPITAL.

#### Changes in Numbers.

				M.	F.	T.	M.	F.	T.
Patients in the Hospital 1st Jan. 1937 :—									
Hertfordshire Patients	...	...	...	321	676	997			
Other Patients	...	...	...	52	48	100			
							373	724	1097
Admissions in 1937	...	...	...	...	...	...	129	226	355
Total Cases under Treatment in 1937				...	...	...	502	950	1452
Discharges and Deaths in 1937 :—									
Recovered	...	...	...	25	66	91			
Relieved	...	...	...	19	33	52			
Not Improved	...	...	...	19	26	45			
Died	...	...	...	21	50	71			
							84	175	259
							418	775	1193
Patients in the Hospital, 31st Dec. 1937 :—									
Hertfordshire Patients	...	...	...	364	718	1082			
Other Patients	...	...	...	54	57	111			
							418	775	1193

## Admissions.

27. The number of admissions was 355 of whom 338 were Direct Admissions. The latter included 253 First Attack Cases, compared with 184 in 1936.

Direct Admissions, 1937 :—

Voluntary	...	134	...	39.6	per cent.
Temporary	...	23	...	6.8	„ „
Certified	...	181	...	53.5	„ „

Twenty-seven of these cases were admitted on Urgency Orders and were graded after admission, seven as Voluntary and two as Temporary patients. Three were discharged and fifteen were Certified.

The number of Private patients admitted was eight male and twenty-seven female, a total of thirty-five, including two men and four women who were transferred to the Private class shortly after admission.

## Discharges.

28. The Recoveries numbered 91, all of whom, except five had been Direct Admissions in 1937 and previous years. This shows a Recovery Rate as regards Direct Admissions of 26.9 per cent. as compared with 35.5 per cent. in 1935 and 36.6 per cent. in 1934.

The percentage of Recoveries among the 6035 Total Direct Admissions in 37 years (1901-37) has been 32.7, and among the 4027 First Attack Direct Admissions in the same period it has been 31.0.

These results are disappointing, but are to some extent explained by the very heavy admission rate during the last three months of the year. During this time 113 patients were admitted and for the statistical period concerned very few of them appear as discharges.

Those discharged "Relieved" to the care of their friends numbered 52. A proportion of these subsequently recovered.

The number of those discharged as "Recovered," and "Relieved" together total 143, of whom 137 were direct Admissions, giving a combined discharge rate of 42.3 per cent. as regards



direct Admissions. In addition 45 patients were discharged to the care of their friends as "Not Improved" (13·3 per cent.) making the total discharges 55·6 per cent. of the admissions.

### Deaths.

29. The deaths were 71 in number, 21 men and 50 women, being a percentage of 6·2 on the average daily number on the Register during the year, viz., 1137. The rate of deaths in 1936 was 7·1 per cent. Post-mortem examinations were made in 38 instances.

The average age at death was 64·9 years, compared with 61·5 in 1935.

### Service Patients.

30. One "Service" patient was admitted.

Three "Service" patients died.

### Hertfordshire Patients.

31. The following were the numbers of Hertfordshire patients in Mental Hospitals on 31st December of the years named :—

31st Dec.	Total Herts Patients in Mental Hospitals.			Increase in each interval. (*Decrease).			Total Beds owned by Hertfordshire.			Excess of Beds owned by Herts.		Deficiency of Beds owned by Herts.	
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	M.	F.
1895	267	346	613	—	—	—	230	284	514	—	—	37	62
1900	306	367	673	39	21	60	498	592	1090	192	225	—	—
1905	361	476	837	55	109	164	460	546	1006	99	70	—	—
1910	462	576	1038	101	100	201	490	590	1080	28	14	—	—
1915	437	604	1041	—25*	28	3	490	590	1080	53	—	—	14
1920	328	565	893	—109*	—39*	—148*	490	691	1181	162	126	—	—
1925	372	639	1011	44	74	118	490	691	1181	118	2	—	—
1930	415	737	1152	43	98	141	502	716	1218	87	—	—	21
1935	436	745	1181	21	8	29	580	924	1504	144	179	—	—
1936	439	783	1222	3	38	41	570	922	1492	131	139	—	—
1937	476	825	1301	37	42	79	570	922	1492	94	97	—	—

Further statistical tables are appended to this report.



### Accommodation and Equipment.

32. The work of renovation throughout the Hospital has continued but is not yet quite complete. The plans for the new male Admission Unit have been agreed with the Board of Control, and it is hoped that work will be commenced on this in the near future.

### General.

33. The health of the patients has generally been satisfactory.

The following cases of infectious disease were notified during the year 1937 :—

	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Pulmonary Tuberculosis ...	—	4	4
Diphtheria ... ..	2	—	2

Six patients sustained fractures during the year, in five cases these were accidental falls in or about the wards. In one case the fracture was the result of violence by another patient.

Five inquests were held during the year, the circumstances of which have been fully reported.

### Treatment.

34. There is nothing unusual to record in the methods of treatment employed during the year. It will be seen that increasing attention is being given to the adjustment of patients to their home circumstances by means of psychiatric social work, and what is quite as important in some cases, the inculcation of a reasonable and understanding attitude on the part of relatives and others towards the patient both while in hospital and after discharge.

It is now our practice where restlessness and confusion are marked symptoms, to have an estimation of the blood bromide content made. In a considerable number of cases where the bromide content is excessively high, treatment directed to the elimination of the bromide has been followed by a marked improvement in the mental condition of the patient.

That sedatives other than bromides are also being used without any clinical advantage seems very probable. During recent years attempts have been made to reduce the amount of sedatives given

in the hospital. Daily summaries of all sedatives given have been kept by the nurses for every ward since the beginning of 1937, and a determined effort has been made to interest both medical officers and nurses in having as low a sedative record as possible. It is hoped that analysis of the figures will be made later on and that some conclusions may be deduced from them. It is interesting, however, to compare the figures taken from what appears to have been an average week in 1929 with those for the last quarter of 1937.

They are as follows :—

<i>Year.</i>	<i>Number of Patients.</i>			<i>Weekly Number of Sedatives.</i>		
1929	...	...	863	...	...	1064
1937	...	...	1136	...	...	408

Drugs given to epileptics with a view to controlling fits have not been included in the figures given.

### Special Departments.

35. The work carried out is shown in the following table :—

	<i>M.</i>	<i>F.</i>	<i>Total.</i>
<i>Ear, Nose and Throat Clinic.</i>			
Treated ... ..	8	11	19
Total Attendances ...	8	14	22
<i>Gynaecological Clinic.</i>			
Cases examined and treated —	—	17	17
<i>Dental Clinic.</i>			
Cases examined ...	75	96	171
Total Attendances ...	185	262	447
<i>X-Rays.</i>			
General ... ..	4	11	15
Dental ... ..	1	1	2
<i>Operations (under general anaesthesia).</i>			
Ovarian Cyst ... ..	—	1	1
Appendicectomy ...	—	3	3
Amputation of Breast ...	—	1	1
Dilation and Cauterization	—	2	2
Dilation and Curetting	—	1	1
Grastotomy ... ..	1	—	1
For Fractured Skull ...	1	—	1
Tonsillectomy ... ..	—	1	1
	—	—	—
	2	9	11
	—	—	—

## Psychiatric Social Work.

36. The Report of the Chief Psychiatric Social Worker is appended.

Further reference to this important aspect of the Hospital's activities will be found when referring to the Out-patient Clinic.

The report of Psychiatric social work done at Hill End Hospital during 1937 does not, at first sight, appear to show much that is new or startling. When, however, comparison is made of the figures since the appointment of the first worker it will be noted that the increase is remarkable, both in amount and in steadiness.

Since 1934, the total number of visits per annum have shown an increase of 1199, and the interviews an increase of 628. The staff of the Department has grown from one worker (who had to undertake all duties from answering the telephone, filing, and typing, as well as the usual ones of her profession), to four fully trained psychiatric social workers and one secretary with a junior assistant. The work of the past year has been accomplished by two psychiatric social workers, two bursars for six months each, one additional psychiatric social worker for five months and one secretary. The additional worker and secretarial assistant began their duties respectively in January, 1938 and December, 1937.

There are two reasons for the increase of work. One is the steadily growing number of admissions (the average monthly rate in 1934 was 22, and in 1937, 29.5—which also means more discharges and after-care) ; and the other is the rapid growth of the Clinic. The total attendances at the Clinic were 852 in 1935 (the first year in this present form), and 1797 in 1937. The Hospital has the largest unit of psychiatric social work in any Hospital or Clinic in the country except the London Child Guidance Clinic, which is the official demonstration and training Centre for all students in training.

The workers divide the County into geographical areas. All patients, Hospital or Clinic, in that area become the responsibility of that worker, who is also able to get to know the outside workers and to become familiar with conditions in her district.

It is impossible to separate the work of the Hospital and Clinic. It is all part of one scheme for the promotion of mental hygiene in the County of Hertfordshire, but certain sections can be dealt with separately. It is now possible to visit the relatives of every patient shortly after admission, to establish contact with them in their difficult days before they may visit the Wards. The report of the home situation, of both the patient's reaction to his difficulties, and of the relative's attitude to the patient, is presented to the Medical Officers at the twice-weekly Conference before the



Ward round. Then, as a rule the psychiatric social worker steps aside until the question of discharge is brought up again, when once more relatives are seen, interviews with patients take place, and plans are discussed with Medical Officers. Reports of those patients on trial, on prolonged trial, or discharged but on whom after-care continues, are also presented regularly.

It will be noted that there is a decrease in the number of patients to whom financial help is given. In one or two cases, however, a substantial allowance, renewed each month by the Discharge Committee, has been continued over a prolonged period. For example, one patient has been allowed out on trial with allowance. She is an unstable woman with a very bad family history, who has been in Hospital many times. She is now visited regularly and her relatives have learnt how to manage her during her relapses, and have certainly managed to look after her at home quite satisfactorily. The family, formerly in good circumstances, is now badly off ; the patient has a small allowance granted by the Discharges Sub-Committee and thus, for the first time in her life, is able to contribute towards the upkeep of the household. The psychological effect of this on her is nothing short of remarkable and must certainly be counted as a decisive factor in her comparative stability.

Another case where after-care would have been impossible without substantial aid is that of an unstable young man, brought up at the cost of public funds, for whom there was no Child Guidance available when he most needed it. After two years in Hospital he was discharged and various plans made for his future. Owing to the state of the labour market and his unsuitability for many kinds of work, he has found much difficulty in becoming re-established, but there is every evidence that he will obtain employment in the near future, and become a self-supporting citizen. He is one of the, alas, large number of young people to whom Hill End Hospital is the only "home" to which he can look for help and guidance in times of difficulty.

It will be noticed that there is some increase in work placements. This is entirely due to the co-operation of the managers of the Labour Exchanges, who are visited personally by the worker before the application of the patient, and who make strenuous efforts to place them in suitable positions. When desired, the employer is also visited by the worker, but this is only done at the request of the Exchange and the patient.

There is evidence, shown in the report of the Clinic Psychologist, that a regrettably large proportion of Mental Defectives in some way escape notification during their school days, and



break down in later life, and become an expense to the community for which there is no real justification. For example, a young man of twenty-nine came into Hospital after an attempt at suicide. He was found to be a high grade Mental Defective. Before admission to Hospital he had twice been before the police court, had been on probation and had served a term of imprisonment. There was no question of the justice of the sentences for the offences committed, but he was an individual who should certainly have been placed under guardianship, and not allowed to be in a position in which he could commit offences against the law. This is one of a number of instances which have come to light during the past year.

*Training.* The future of psychiatric social work in the community is a question which remains in the forefront of the policy of the Visiting Committee. Two bursaries have again been awarded ; the first to Miss Goldberg, who was subsequently appointed as second psychiatric social worker in August, 1937. The second was awarded to a promising Swedish student, Miss Stina Person. She had received an excellent training in Sweden, but as there is no course there comparable to the Mental Health Certificate of the London School of Economics, she was accepted without that qualification. She did some excellent work, and never allowed the difficulty of language or nationality to interfere in her relations with patients or relatives. She was much missed on her departure. She obtained a post as psychiatric social worker in the Child Guidance Clinic at Stockholm almost at once. The mutual exchange of views has been of much benefit to the Department and it is to be hoped that more experiments of this nature will be made in the future at Hill End Hospital where it is possible to have experience in every branch of psychiatric social work.

*Lectures.* The Psychiatric Social Workers often receive requests to speak to groups of other workers on their work in Hospital and Clinic. During 1937 three groups of head-teachers have made such requests ; one social club ; and one Froebel Training College (Bedford). A group of students from the latter visited Hill End Hospital.

#### Statistics, 1937.

<i>Visits paid :—</i>			<i>Bursar later</i>			
		<i>P.S.W. 1.</i>	<i>P.S.W. 2.</i>	<i>P.S.W. 3.</i>	<i>Bursar.</i>	<i>Total.</i>
Hospital	...	342	292	264	38	936
Clinic	...	189	237	229	42	697
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total	...	531	529	493	80	1633
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<i>Total Number of Visits paid :</i>				1633.		

*Interviews :—*

Hospital	...	161	81	55	10	307
Clinic	...	168	230	149	48	595
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
		329	311	204	58	902
		<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

*Total Number of Interviews : 902*

<i>Cases dealt with per year :—</i>				1937	1936	1935
New Cases	...	...	...	373	248	137
Old Cases brought forward			...	150	139	62
				<hr/>	<hr/>	<hr/>
Total	...	...	...	523	387	199
				<hr/>	<hr/>	<hr/>

*Analysis of Work done : (Hospital and Clinic) :—*

				1937	1936	1935
Co-operation with P.A.C.	...	...	...	115	100	—
„	„	M.D. Authority	...	10	4	—
„	„	Education Authority		90	38	18
„	„	Police Court	...	26	17	8
„	„	Mental After-Care				
		Association	...	33	27	13
„	„	Other Agencies	...	93	76	30
Convalescence arranged	...	...	...	23	16	10
Help in finding work	...	...	...	19	14	8
Financial help from Committee			...	36	52	—
„	„	„	Benevolent Fund	4	5	25
Reports sent to Doctors	...	...	...	87	106	—
Placed in foster homes	..	...	...	5	—	—
Placed in Training Homes	...	...	...	1	—	—

(Signed) E. M. FINDLAY,  
*Chief Psychiatric Social Worker.*

**Library.**

37. The central library from which distributions are made twice weekly to the wards by the honorary librarians, now contains approximately 2,500 volumes.

I greatly appreciate the regularity with which the honorary librarians carry out the work. It is a great help to be able to rely on them in this way.

The system of working may be seen by quoting a short extract from an article contributed to the *Book Trolley* by Mr. Blackler, our Chief Honorary Librarian :—

The procedure adopted is as follows. On arrival, the librarian draws his pass key which enables him to proceed

to any of the wards quite freely ; on one afternoon each week a selection of books is taken round the wards on a trolley, a patient assisting in the distribution ; and on another afternoon the patients who are able to do so come to the library and choose their own books, either by themselves or with the guidance of the librarians. On an average some 110 books are issued each week as well as magazines, etc. In a hospital of this character rather more " wastage " might be expected than in a General Hospital, but only about 250 to 300 books are destroyed or lost in a year. Repairs are executed in the Male Occupational Centre, and this affords a useful and interesting form of occupational therapy for certain classes of patients. A number of the nurses avail themselves of the Library, as they have none of their own. The Library is maintained partly by gifts of books from the Red Cross Library, booksellers, the Public Library, private individuals, etc., and partly by a monthly allowance from the Visiting Committee of the Hospital and the profits of the Canteen.

The staff appear to welcome the visits of the librarians in the wards and render assistance very readily whenever possible. The patients very obviously appreciate the Library *and contact with the librarians*, the talk frequently not being confined to books. The Medical Officers value our work from a curative point of view, and are of opinion that the need for a library is far greater in the Mental Hospital where patients may remain for years than in hospitals where patients make a limited stay only.

### **Voluntary Help.**

38. We have, as usual, received assistance from a number of willing helpers at ward parties, etc., which has been very welcome and at Christmas a large number of gifts were sent, many from former patients, all of which were greatly appreciated.

### **Recreations.**

39. These followed the usual lines, but owing to the interest of the staff and other helpers a degree of interest and freshness was imparted to them, which is of the greatest value.

The Patients' Annual Fete was held on the 7th July and was attended by 253 male and 404 female patients and a very enjoyable afternoon was spent.



During December the Hospital Musical and Dramatic Society produced a very successful revue entitled, "Bits and Pieces," under Mr. Goodchild's direction, and was greatly enjoyed by all those able to attend.

On Good Friday the "Story of Calvary" was successfully rendered by the Hospital Choir, under the direction of Mr. R. H. Smith.

During the winter season the usual weekly dances or other entertainments were given and Ward parties run by the nursing staff and were greatly appreciated by the patients.

The cricket and football elevens played regularly with the following result :—

CRICKET. Of the fifteen matches played, six were won, three lost and six drawn.

Four Patients' matches were played during the season.

FOOTBALL. Of the fourteen matches played, eight were won, five lost and one drawn.

### **Training in Psychiatry.**

40. Unusual opportunities are available here for acquiring a wide variety of clinical experience, since all classes of patients are treated at the Institution. Regular clinical ward rounds are made twice weekly by the Medical Director when new cases and others of interest are seen and discussed.

Two house physician posts are available, tenable for periods of six months or one year. In addition to this an arrangement was made last year with Dr. Rees, Medical Director of the Tavistock Clinic, whereby one of the house physicians can complete the Tavistock Clinic's annual course in psychotherapy, while holding the appointment as House Physician at Hill End.

Under this scheme the selected candidate works also as a Clinical Assistant at the Hill End Clinic, undertaking the treatment of patients here, but being supervised as regards the cases by a member of the Tavistock Clinic.

The Visiting Committee, in view of the value of the work done in the clinic here, have agreed to pay an honorarium which equals the fee due for the Tavistock Course, thus by securing this appointment a practitioner can acquire a good grounding in psychiatry at a minimum of expense.



Apart from this scheme, training in psychotherapy, under the tuition of senior psychiatrists at Hill End is available for junior medical officers and house physicians, who show an aptitude and desire for this work.

### Nurses' Training.

41. The recent extensions have necessitated an increase in the numbers of the nursing staff. Some difficulty was experienced in obtaining nurses, but at the present time, we are almost up to our requirements.

The number of nurses entering for the examination is satisfactory and Miss Houghton, Assistant Matron and Sister Tutor, continues to devote herself to the training of the Probationers and in general meets with good response.

The successes at the Examinations in 1937 were as follows :—

G.N.C.	Preliminary, 12.	Final, 5.
R.M.P.A.	Preliminary, 15.	Final, 13.

The Nurses' Annual Fete and Sale of Work which took place on the 14th July, 1937, resulted in a sum of £32 6s. 8d. being sent to Mental After-Care Association and an equal amount to the National Society for the Prevention of Cruelty to Children.

Lady Faudel-Phillips declared the Fete open and very kindly presented the Nursing Medals. The recipients were :—

Constance Adelaide Simmons	...	Bronze Medal.
Isabel Evans	... ..	„ „
Edna Maud Waddington	... ..	„ „
Frederick William Burton	... ..	„ „

Fears have been expressed in some quarters that reduced hours of work (*i.e.*, reduced to ninety-six per fortnight), higher pay and increased facilities for recreation, with the abolition as far as possible of restrictions on a nurse's freedom, would result in a deterioration of the service given. My experience of the ninety-six hour fortnight, which was started here in 1928, tends to the opposite conclusion. It seems that greater personal liberty and an increase in the time off duty, gives further opportunity for the performance of those acts of service, over and above what can reasonably be required, which characterise the vocation of nursing, and which no thoughtful person would readily see sacrificed.

## OUT-PATIENT CLINIC.

## STATISTICS, 1937

	1937.	1936.	1935.
<b>Number of Patients dealt with :—</b>			
Brought forward from 1936 under treatment	40	31	16
Brought forward from 1936 awaiting treatment	13		
New cases referred ... ..	176	128	101
Old cases referred again ... ..	5	5	8
	<hr/>	<hr/>	<hr/>
Total ... ..	234	164	125

**Disposal of New Cases :—**

Given advice only ... ..	15	31	
Advised admission to Hill End Hospital—			
As Voluntary Patients ... ..	25	14	
„ „ „ plus Clinic treatment	3	—	
Given further Clinic investigation and/or treatment ... ..	105	84	
	<hr/>	<hr/>	
	148	129	
Did not attend ... ..	19	4	
Awaiting appointments, 31st December, 1937	14	—	
	<hr/>	<hr/>	
	181	133	

(NOTE : *Advised admission to H.E.H. :—*

Seen at St. Albans and Mid-Herts Hospital	15
Seen at Hill End Hospital ... ..	13
	<hr/>
	28

Of these, 20 were admitted).

**New Cases seen at :—**

Hill End Clinic ... ..	144	70	29
St. Albans and Mid Herts Hospital ...	37	54	72
	<hr/>	<hr/>	<hr/>
	181	124	101
	<hr/>	<hr/>	<hr/>

**Attendances :—**

At Hill End Clinic ... ..	1760	1480	770
At St. Albans and Mid Herts Hospital ...	37	59	82
	<hr/>	<hr/>	<hr/>
	1797	1539	852

						1937.	1936.
<b>Discharges :—</b>							
Discharged	Recovered	...	...	...	...	20	17
„	Relieved (Treated)	...	...	...	...	21	18
„	„ (Investigated)	...	...	...	...	47	18
„	Not Improved	...	...	...	...	2	4
						<hr/>	<hr/>
						90	57
Patients referred, but never attended						19	
„ given advice only (one attendance)						15	
„ admission to Hill End Hospital						25	
„ refused treatment						7	
„ died						1	
„ left County						1	
						<hr/>	
						158	
						<hr/>	
TOTAL NUMBER OF PATIENTS SEEN						234	
Less Number of Patients discharged						158	
						<hr/>	
Current Cases						76	
						<hr/>	

**Situation on December 31st, 1937 :—**

Cases under treatment	...	...	...	...	...	48
„ awaiting treatment	...	...	...	...	...	11
„ awaiting appointments	...	...	...	...	...	14
„ partially examined	...	...	...	...	...	3
						<hr/>
TOTAL NUMBER of current cases						76
						<hr/>

**Sources of Reference :—**

						1937.	1936.
Private Doctors	...	...	...	...	...	54 ( 3)	60
School Teachers	...	...	...	...	...	12 (12)	13
School Medical Officer	...	...	...	...	...	33 (33)	—
Probation Officers and Moral Welfare Workers	...	...	...	...	...	17 ( 5)	13
P.A.C. Homes	...	...	...	...	...	7 ( 7)	8
„ Boarding-Out Visitor	...	...	...	...	...	4 ( 4)	
„ Other Officials	...	...	...	...	...	6 ( 3)	
Hill End Hospital	...	...	...	...	...	10 (—)	5
Other Hospitals	...	...	...	...	...	8 ( 5)	4
Observation Ward	...	...	...	...	...	1 (—)	2
Relatives	...	...	...	...	...	11 ( 9)	6
Self	...	...	...	...	...	3 (—)	8
Psychiatric Social Worker	...	...	...	...	...	7 ( 4)	—
Other agencies	...	...	...	...	...	8 ( 5)	14
						<hr/>	<hr/>
						181 (90)	133
						<hr/>	<hr/>

(Figures in brackets refer to children under 16 in 1937).



**Problems as Referred :—**

(Classification circulated by Inter-Clinic Committee, January, 1938).

1. Nervous Disorders :				Over 16.	Under 16	Total.
Fears and anxieties	...	...	...	12	6	18
Seclusiveness	...	...	...	—	—	—
Depression	...	...	...	12	1	13
Excitability	...	...	...	2	1	3
Apathy	...	...	...	1	—	1
Obsessions	...	...	...	2	1	3
Emotional Attacks	...	...	...	3	—	3
				—	—	—
				32	9	41
				—	—	—
2. Habit Disorders :						
Speech disorders	...	...	...	4	4	8
Sleep disorders	...	...	...	2	1	3
Movement disorders	...	...	...	—	1	1
Excretory disorders	...	...	...	1	3	4
Feeding disorders	...	...	...	—	—	—
Nervous pains and paralyses	...	...	...	11	—	11
Fits	...	...	...	—	2	2
				—	—	—
				18	11	29
				—	—	—
3. Behaviour Disorders :						
Unmanageable	...	...	...	3	7	10
Tempers	...	...	...	—	5	5
Aggressiveness	...	...	...	—	—	—
Jealous behaviour	...	...	...	—	—	—
Demanding attention	...	...	...	—	—	—
Stealing	...	...	...	2	10	12
Lying and romancing	...	...	...	—	—	—
Truancy and wandering	...	...	...	1	2	3
Sex difficulties	...	...	...	7	3	10
Drug addict	...	...	...	1	—	1
				—	—	—
				14	27	41
				—	—	—
4. Vocational and Educational Difficulties :						
Backwardness	...	...	...	12	35	47
Inability to concentrate	...	...	...	2	1	3
Inability to keep jobs	...	...	...	7	1	8
Special disability	...	...	...	—	4	4
Miscellaneous	...	...	...	6	2	8
				—	—	—
				27	43	70
				—	—	—

**Dull and Backward Children, 1937 :—**

Total Number of Referrals on January 1st, 1938					...	25
Awaiting first appointment	...	...	...	...	7	
Refused to attend	...	...	...	...	7	
Dealt with by Juvenile Court	...	...	...	...	7	
Referred to other agencies	...	...	...	...	4	
To N.S.P.C.	...	...	...	2		
To Guy's Hospital	...	...	...	1		
To St. Thomas's Hospital	...	...	...	1		
Under treatment	...	...	...	...	6	
Foster-home, psychotherapy and coaching	...	...	...	1		
Foster-home and psychotherapy...	...	...	...	1		
Playgroup	...	...	...	2		
Psychotherapy	...	...	...	1		
Convalescence	...	...	...	1		

42. The statistics show very conclusively how the work of the Clinic is increasing. It has only been possible to cope with the work by increasing the Clinic staff.

Residents in Hertfordshire are now becoming aware of the special facilities offered by the Clinic for examination and treatment. Some patients have been sent previously to Clinics in London and have been referred back to Hill End Hospital to find, to their surprise, that similar facilities are available in the county. An advantage, not invariably obtained in London, is that no one is seen without an appointment, so that waiting is reduced to a minimum. A disadvantage is that St. Albans is not easy of access from distant parts of the county. It is to be hoped that the time is not far distant when treatment centres may be set up in other areas.

The most striking feature of the statistics under the heading "New Cases" is the decrease in the number of first attendances at the St. Albans and Mid Herts Hospital and the increase at Hill End Hospital. Added to that the fact that of the total (181) ninety new patients were under sixteen, shows that there is no great deterrent in the minds of parents to attendance at a Mental Hospital.

It will be noticed that the number of interviews with psychiatric social workers has increased greatly, though is still considerably less than the number of visits paid. The total of visits and interviews for Hospital patients is 1243 and for Clinic patients is 1292. The total of Clinic patients (181), is slightly larger than that of Hospital patients (162). This is the first time that this increase

has been noted and it is to be expected that it will probably be maintained, unless the admission rate increases very much during 1938.

The large number of patients (19), referred, who never attended is accounted for by the fact that seven dull and backward children referred at the beginning of a new scheme by the School Medical Officer whose parents were, for some reason or other, unco-operative. (See below).

The increase in numbers referred by Probation Officers and Moral Welfare Workers is satisfactory—indicating that the service offered is fulfilling a need in that direction.

It is hoped that during 1938 it may be possible to arrange that Justices, interested particularly in Juvenile Courts, may visit the Clinic, take note of the particular facilities available and so judge for themselves in what cases help can be given. The co-operation between Probation Officers and Psychiatric Social Workers is very close, and is of the greatest value. In view of the investigation just being undertaken (January, 1938), by Prof. Carr Saunders in the causes of Juvenile Delinquency, this is particularly gratifying. If a child on probation is referred for treatment, the mutual arrangement is usually that the Probation Officer shall deal with the child in the usual way, leaving the Psychiatric Social Worker to deal with the family, but always working together in close co-operation. This is essential if overlapping is not to occur.

*Boarding-Out.* Reference was made to the need for close co-operation between the County Boarding-Out Visitor or Probation Officer and the Psychiatric Social Worker in the Report for 1936. This has been maintained. Two children placed out and supervised by the Clinic have now been entirely handed over to the Boarding-Out Visitor and two more are almost ready to be so handed over.

*Foster Home Placement.* It has been found that in Hertfordshire an excellent scheme exists for the assessment of the material conditions of foster parents ; but there does not appear to be anything comparable for the psychological assessment of the same homes—*e.g.*, of ascertaining the suitability of certain foster-parents for the care of certain foster-children. An excellent foster home may be unsuitable because of the emotional immaturity of one or both foster-parents. The Clinic should be in a position to help on this point and it is hoped during 1938 to be able to fill



in some of the gaps. The importance of foster home placement cannot be over-estimated. Psychiatric examination can show whether a child needs individual care, or whether he can be better placed in a School or other Institution. Again, some children are not essentially unstable, but merely react violently to an unsuitable environment. Examination is followed by a period of supervision by the Clinic worker, whereby the decision of the Clinic is confirmed, before the child is returned to the Boarding-Out Visitor.

As a rule, an unstable child will do badly in a large Institution and requires careful placement with Clinic treatment, while the foster-parents need regular guidance of a simple nature to help them to understand the needs of the foster child. One case may be cited in illustration of this. A small boy came from the depressed areas in the care of an aged grandparent to live with an aunt in Hertfordshire. His mother was dead, his father was alcoholic, there was no money for his maintenance. In due course the grandfather became an invalid, the boy was more than ever unwanted, and was charged by his aunt as being beyond control. Of necessity he was placed in the Observation Ward and remanded for examination. The School Medical Officer examined him, found him to be dull and backward, and referred him (on the existing scheme) for Clinic examination. The grandfather meanwhile died, and thus the child's last link with any individual who loved him was removed. He was found by the Clinic to be an extremely unhappy child reacting to what for him, was a bad environment. A report was sent to the Court recommending Clinic treatment and foster-home placement. The Court dealt with him under the Children and Young Persons' Act, 1933, as being in need of care and protection, and asked the Clinic to place him. This was done and the child has improved steadily. His symptoms of enuresis and faecal incontinence have entirely disappeared, he now appears to be a normal happy boy, his foster mother describes him as "being a boy in whom the goodness is only waiting to blossom out," he is attending school and will probably be discharged shortly. It has also been found that he was not really dull and backward but of normal intelligence, as a mistake was made in his birth date. He is now for the first time in nearly nine years in a normal happy home, with stable foster parents, where he is really wanted.

*Examination of Dull and Backward Children.* During 1937 a tentative arrangement was made with Dr. Hyslop Thompson,

County Medical Officer, by which all children referred to the School Medical Officer and found by him to be dull and backward (not mentally defective within the meaning of the Act) should be referred to the Clinic. The reason for this is that a high percentage of "problem children" are found in the dull and backward group. The total number thus referred during the last seven months of 1937 was twenty-five. Seven of these were awaiting their first appointment on January 1st, 1938 ; seven refused to attend ; one was dealt with by the Juvenile Court ; four were referred to other agencies and six are under treatment at the Clinic.

It will be noted that seven of these refused to attend after being visited by the Psychiatric Social Worker and having the aims of Clinic treatment explained to them. This group were all referred in September. Before and after that date, the parents were all found to be co-operative, so there was presumably some alteration made in procedure about that date which alienated the parents. Two were already known to the N.S.P.C.C. and advised Institutional treatment under the P.A.C. (This was granted in the case of one child, and refused in the other. The latter has now come under the care of the Probation Officer). Two were referred to special departments at Guy's Hospital and St. Thomas's Hospital for further investigation of physical conditions. Two children were living in P.A.C. Homes and considered unsuitable for Institutional life. Up to date they are doing well in foster homes and are getting on fairly well in school.

Of all the numbers examined, the Clinic has been able to offer some further advice, showing that the experiment up to date appears to be justified.

*Link between Clinic and Hospital.* A certain number of patients have been examined and treated at the Clinic, and later advised to come in as voluntary patients whilst their treatment at the Clinic has been continued. At the same time, work in the home with the relatives has been continued. By this means, the adjustment of the patient to the community has been hastened. In other cases, the Moral Welfare Worker has referred unstable difficult girls to the Clinic. For these, there is usually nothing available but training in some kind of Sisterhood where usually preventive rescue work is undertaken. This training is unsuitable and the Sisters themselves are not equipped to tackle unstable girls. In some cases the girls have been admitted to Hill End Hospital as



voluntary patients and receive a training and discipline in work and in community life from doctors and nurses who are accustomed to deal with their kind. One girl, in particular, would probably have been sent to Borstal (her mistress refused to charge her), but after six months in Hospital, is now happily placed with an understanding mistress in what appears to be a very suitable situation.

This is only one of similar cases, both among male and female patients, where close co-operation between Hospital and Clinic is maintained.

### **Psychologists' Report.**

43. The report of the Senior Psychologist, Miss K. M. Duguid, follows. Though the work is concerned chiefly with out-patients a small number of in-patients have been referred for tests also and these are dealt with separately at the end of the report.

*Out-Patient Clinic.* During the year seventy-five patients have been given psychological examinations ; of these, forty-two were males and thirty-three were females. The ages of the former ranged from 3-23 years with a median of 10 years, and the ages of the latter from 5-30 years with a median of 13 years. The median for both combined was 11 years. Three patients, or 4 per cent., were under five years and nineteen patients, or 25.3 per cent., were sixteen years or over. These figures follow closely the figures for last year, there being a slight increase of patients of sixteen years and over and a slight decrease in patients under five. There were several children between five and six years which accounts for the slight decrease in the median chronological age for the total. The increase in the number of psychological examinations this year has been made possible by the addition to the staff in June of another Psychologist for one session a week.

The Stanford Revision of the Binet scale was used for sixty patients, thirty-one boys and twenty-nine girls, and sixty-one patients, thirty-five boys and twenty-six girls were given performance tests. In six cases where the child had already been tested on the Binet scale before being referred to the Clinic, only performance tests were given. The Merrill-Palmer scale for pre-school children was used in five cases, three children were found to be untestable and two remained unfinished at the end of the year. Two cases were re-tested.



The following tables summarise the results of the psychological tests :—

#### STANFORD REVISION OF THE BINET SCALE.

I.Q.	Boys.		Girls.		Total.	
	No. of cases tested.		No. of cases tested.		No. of cases tested.	
Over 140	...	—	...	—	...	—
130-139	...	1	...	2	...	3
120-129	...	—	...	2	...	2
110-119	...	4	...	1	...	5
100-109	...	3	...	—	...	3
90-99	...	6	...	3	...	9
80-89	...	11	...	7	...	18
70-79	...	3	...	6	...	9
60-69	...	3	...	7	...	10
50-59	...	—	...	1	...	1
Number of cases	...	31	...	29	...	60
Mean I.Q.	...	90.7	...	84	...	87.5
Median I.Q.	...	88	...	82	...	85
Range of I.Q.	...	64-130	...	53-132	...	53-132

#### PERFORMANCE TESTS.

I.Q.	Boys.		Girls.		Total.	
	No. of cases tested.		No. of cases tested.		No. of cases tested.	
Over 140	...	1	...	1	...	2
130-139	...	—	...	1	...	1
120-129	...	1	...	—	...	1
110-119	...	3	...	—	...	3
100-109	...	8	...	2	...	10
90-99	...	5	...	2	...	7
80-89	...	7	...	3	...	10
70-79	...	6	...	8	...	14
60-69	...	2	...	2	...	4
50-59	...	2	...	4	...	6
Under 50	...	—	...	3	...	3
Number of cases	...	35	...	26	...	61
Mean IQ.	...	91.6	...	77.2	...	85.3
Median I.Q.	...	92	...	73	...	83
Range of I.Q.	...	57-150	...	40-149	...	40-150

#### MERRILL-PALMER TESTS.

Number of cases : 5 (3 boys, 2 girls).  
Mean I.Q. : 84.2.  
Median I.Q. : 81.  
Range of I.Q. : 77-96.

## COMPARISON WITH OTHER YEARS.

## Median I.Q.

BINET.		Boys.		Girls.		Total
1935	...	92	...	89	...	90
1936	...	86	...	86	...	86
1937	...	88	...	82	...	85
PERFORMANCE.						
1935	...	89	...	92	...	90
1936	...	80	...	83	...	80
1937	...	92	...	73	...	83

## Mean I.Q.

BINET.						
1936	...	89.9	...	81.3	...	85.6
1937	...	90.7	...	84	...	87.5
PERFORMANCE.						
1936	...	87.7	...	81.2	...	84.4
1937	...	91.6	...	77.2	...	85.3

Taken as a whole there is little difference between the median and mean I.Q.s this year, as compared with previous years, but on the performance scale there is an increase in the median and mean I.Q.s for boys and a decrease for girls. A number of children referred for statutory examination under the M.D. Acts and found to be above the border line of mental defect, though of dull intelligence, have been referred for examination at the Clinic and educational advice and this will necessarily tend to keep the median I.Q. rather low.

*In-Patients.* As in previous years a number of In-patients have been referred for psychological examinations. This year there has been a slight increase in the average number, *i.e.*, 10.4 per cent. of the total number of cases tested, as against 9.2 per cent. in 1936. The majority of these patients are referred to ascertain whether or not they are mentally defective. Three patients were re-tested. In all, eight women and five men were examined this year. Seven women and four men were tested on both Binet and performance tests and one man was examined on the Binet scale only. One woman remained unfinished at the end of the year, but it is expected that the examination will be completed early in 1938. The median chronological age was 25.

Binet.		MEN.		WOMEN.		TOTAL.
Number of cases		5	...	7	...	12
Mean I.Q.	...	65.2	...	74.8	...	70.8
Median I.Q.	...	60	...	72	...	70-71
Range of I.Q....		50-84	...	67-95	...	50-95
Performance.						
Number of cases		4	...	7	...	11
Mean I.Q.	...	63.7	...	61.8	...	63.4
Median I.Q.	...	62-63	...	59	...	62
Range of I.Q. ...		59-71	...	40-100	...	40-100

*Remedial Coaching.* Remedial coaching in reading and arithmetic has been given to nine children and they have made sixty-six out of a possible seventy attendances. Progress has been satisfactory and we have been able to discharge six children.

As during last year several children have been seen for play sessions by the Psychologist. Five children having made fifty-two out of a possible sixty-one attendances. Four of these children have been discharged and the fifth will continue to attend next year.

*Play Group.* In June this year it was possible to re-open the play group and this has been held weekly for a small group of children. Five boys have attended this group, making a total of fifty attendances with an average of ten attendances per child. In two cases the children joined the group while waiting for a vacancy for individual treatment.

(Signed) K. DUGUID,  
Psychologist.

### PATHOLOGICAL LABORATORY.

44. The report of the Pathologist which is appended, shows how much the work of this department has increased :—

The amount of work done in the Laboratory during 1937 has again increased, the number of examinations made being 40.4 per cent. greater than last year. The greater part of the additional work is in the number of specimens examined for the County and local authorities, and especially in the examination of milk samples. These are now examined by the plate count and coliform method and also by the methylene blue reduction test, the latter now being required by the Ministry of Health under the Milk (Special Designations) Order, 1936.

The comparison of the two methods has been interesting and an analysis of the results for the first six months of the year was sent on by Dr. Hyslop Thomson to the Ministry of Agriculture.

The local authorities are also becoming increasingly aware of the importance of the examination of throat swabs for Haemolytic Streptococci and this has increased our work to a considerable extent.

During the latter part of the year specimens of faeces, sputum and blood were examined for cases of catarrhal jaundice in a small outbreak in one part of the county. No spirachertes were found and feeding experiments to guinea pigs with cultures of a streptococci isolated from stools and a large gram negative diplococcus from urine produced only negative results.

A number of estimations of the bromide content of the blood of some confused and restless cases newly entering the Hospital



have been made and the results suggest that in a proportion of cases large amounts of bromide had been previously given. In some cases the elimination of the bromide led to a marked decrease in the confusional symptoms of the patient.

### Summary of work undertaken for Hill End Hospital during the year 1937

#### Blood.

Counts	...	...	...	...	...	...	...	101
Urea	...	...	...	...	...	...	...	51
Wassermann reaction	...	...	...	...	...	...	...	322
Meinicke reaction	...	...	...	...	...	...	...	288
Van den Bergh reaction	...	...	...	...	...	...	...	2
Sugar (tolerance curves)	...	...	...	...	...	...	...	3
Sugar content (single)	...	...	...	...	...	...	...	1
Bromide content	...	...	...	...	...	...	...	60
Widal	...	...	...	...	...	...	...	3
Slides for malaria	...	...	...	...	...	...	...	30
Sedimentation rate	...	...	...	...	...	...	...	2
Culture	...	...	...	...	...	...	...	1
Calcium content	...	...	...	...	...	...	...	1

#### C.S.F.

W.R.	...	...	...	...	...	...	...	22
Meinicke	...	...	...	...	...	...	...	20
Routine	...	...	...	...	...	...	...	21

#### Cultures.

Faeces	...	...	...	...	...	...	...	15
Urine	...	...	...	...	...	...	...	20
Throat and other swabs for K.L.B., haemolytic streptococci, etc.	...	...	...	...	...	...	...	59
Tonsils	...	...	...	...	...	...	...	3

#### Urine.

Routine	...	...	...	...	...	...	...	363
Simple chemical examinations	...	...	...	...	...	...	...	163
Microscopy	...	...	...	...	...	...	...	91
For T.B.	...	...	...	...	...	...	...	2

#### Faeces.

For Occult blood	...	...	...	...	...	...	...	2
For T.B. (2 positive)	...	...	...	...	...	...	...	53

<b>Sputum</b> for T.B. (2 positive)	...	...	...	...	...	...	...	23
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<b>Smears</b> for organisms	...	...	...	...	...	...	...	5
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<b>Test Meals</b>	...	...	...	...	...	...	...	7
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<b>Milk</b> (Bacteriology)	...	...	...	...	...	...	...	20
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<b>Water</b> (Bacteriology)	...	...	...	...	...	...	...	1
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„ (Chemistry)	...	...	...	...	...	...	...	1
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Sections	...	...	...	...	...	...	...	1
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Autopsies	...	...	...	...	...	...	...	38
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Total	...	...	...	...	...	...	...	1795
Outside work	...	...	...	...	...	...	...	7607

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9402

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**Summary of Work undertaken for the County Medical  
Officer of Health and other outside Authorities.  
during the year 1937.**

**Sputum.**

For T.B. (17.3 per cent. positive) ... ..	1328
For organisms other than T.B. ... ..	5

**Swabs.**

For K.L.B. (4.9 per cent. positive) ... ..	763
For H.S. (26.0 per cent. positive) ... ..	296
For other organisms ... ..	69

**Milks.**

Accredited for bacteriology ... ..	1453
Accredited for methylene blue test ... ..	1453
Pasteurised (for bacteriology) ... ..	44
„ for phosphatase test ... ..	9
School milks for bacteriology ... ..	87
„ „ methylene blue test ... ..	87
Ordinary milks for bacteriology ... ..	238
„ „ „ methylene blue test ... ..	5

**Milks for microscopy for tubercle bacilli.**

School milk ... ..	87
Bulk samples, other than school milk ... ..	28
Single cow samples .. ...	80
Undefined samples ... ..	3
Biological test for T.B. ... ..	60
For agglutination against B. Abortus ... ..	2
For iron ... ..	11
Bacteriology of milk bottles ... ..	6
Human milk for bacteriology ... ..	4

**Urine.**

Routine ... ..	7
Chemical examination ... ..	9
Microscopy ... ..	87
For culture ... ..	50
For T.B. ... ..	16
Calculus for analysis ... ..	1
Urea clearance test ... ..	4

**Faeces.**

For culture ... ..	13
For occult blood ... ..	26
For T.B. ... ..	12
Microscopy, worms, etc. ... ..	5
Fat content ... ..	2

**Pus.**

For T.B. ... ..	6
For organisms and culture ... ..	25
Smears for organisms ... ..	48

**Blood.**

Counts ... ..	58
Urea per cent. ... ..	41
Culture ... ..	8
Sugar (single samples) ... ..	27
„ (tolerance curves) ... ..	4
W.R. ... ..	98
Meinicke ... ..	88
Complement fixation test for G.C. ... ..	5
Van den Bergh reaction ... ..	1
Widal ... ..	26
Agglutination for Weil's Disease ... ..	3
Grouping ... ..	2
Clotting time ... ..	1
For carbon monoxide ... ..	1
Cows' blood for agglutination against B. Abortus ... ..	1

**Pleural and other pathological fluids for culture, microscopy, etc.** 30

C.S.F. for Urea ... ..	3
„ for microscopy ... ..	23
„ for T.B. ... ..	8
Culture ... ..	21
W.R. ... ..	8
Meinicke ... ..	4
Routine (Lange, cells, etc.) ... ..	31
Hairs for ringworm ... ..	10
Aschek-Zondeim test ... ..	2
Gastric test meals ... ..	2
Vaccines prepared ... ..	7
Sections ... ..	30
Water for bacteriology ... ..	27
„ „ chemical exam. ... ..	21
„ „ hardness only ... ..	2
Food for food poisoning organisms ... ..	4
Semen for spermatazoa ... ..	2
Biological tests (other than milks) ... ..	5
K.L.B. for virulence ... ..	4

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7037
**CELL BARNES COLONY.**

Faeces for culture ... ..	3
Faeces for T.B. ... ..	7
Blood for W.R. ... ..	277
Blood for Meinicke ... ..	277
C.S.F. for microscopy ... ..	2
Culture ... ..	2
Routine (Lange, cells, etc.) ... ..	2

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Total for outside work ... .. 7607

(Signed) A. M. McGRATH,  
*Pathologist.*

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## Officers and Staff.

45. Owing to the fact that for a considerable part of the period under review I have been off duty ill, Dr. Roberts as Deputy Medical Director has been left in charge. He has carried on most successfully and I have had no misgivings about the welfare of the Hospital during this time.

At the end of the year a re-organisation of officers' duties other than those of the medical and nursing departments, was made. Mr. S. E. Sheppard was appointed Controller, with responsibility for co-ordinating and supervising the whole of the non-medical departments of the Hospital. A Clerk, a Steward, an Engineer, a Gardener and a Farm Bailiff being in charge of their respective departments under the Controller.

The Controller, though present at the meetings of the Visiting Committee, and cognisant therefore of general policy, is administratively responsible to the Medical Director, formerly the Medical Superintendent, and works under his immediate control.

The year saw the retirement on pension of Mr. E. J. Hayward, Head Male Nurse and Miss L. Neve, Senior Assistant Matron, both of whom joined the Hospital in its earliest days. They will both be missed and will, it is hoped, enjoy a well-earned period of relaxation in their retirement.

Dr. Noel Hardcastle, who has been so closely associated with the development of the Clinic since its earliest days, resigned his appointment at the end of 1937 on account of ill-health. His experience rendered him a most valuable colleague, and I owe much to his assistance and advice in the successful launching of the Clinic here and we all hope to see him fully restored to health in the near future.

After advertising the post Dr. Lovel Barnes, who joined as Psychiatrist in November, 1937, was appointed as Assistant Medical Director for the Clinic. His experience as an Assistant School Medical Officer, in addition to his other qualifications, renders him particularly suitable for this post, where so many children of school age are seen.

Earlier in the year we also lost the services of Dr. C. Rogerson in connection with the Clinic, who had to relinquish his post here on taking up the appointment of Medical Superintendent of Cassels Hospital, Penshurst. The position is an important one and we wish him every success in his new sphere of work.

Other changes amongst the Medical Staff are as follows :—

Dr. R. L. Moody who was here as House Physician, left us on the 28th July, 1937, and was replaced by Dr. R. L. Buttle on the 3rd August, who stayed until the 24th January, 1938. Dr. N. C. Horne joined as House Physician on the 8th January, 1938.

Dr. J. J. M. Jacobs who was here as Fourth Assistant Medical Officer left on the 31st August, 1937, and was replaced by a Locum Tenens Medical Officer, Dr. S. L. Swartz, who left on the 12th January, 1938. Dr. F. R. C. Casson joined as Fourth Assistant Medical Officer on the 7th January, 1938.

Mrs. E. Norman joined the Clinic staff as Psychologist on the 28th April, 1937. Dr. E. M. Creak as Psychiatrist on the 11th January, 1938. Dr. W. H. Gillespie has been engaged to join as Psychotherapist on the 5th April, 1938.

Dr. F. Louis, Visiting Pathologist, is leaving on the 31st March, 1938, to be replaced by Dr. F. E. Camps, on the 1st April, 1938.

I am fortunate and am grateful for the ever willing help of the Officers of the Hospital and for the ungrudging service almost universally given by the staff.

I am also very grateful for the kindness and consideration extended to me by the Committee during my illness and I look forward to returning at an early date with renewed vigour to the tasks ahead.

I have the honour to be,

Your obedient Servant,

W. J. T. KIMBER,

*Medical Director.*

24th April, 1938.

## Report of Two Commissioners of Board of Control.

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20th January, 1938.

We were sorry to learn, when we arrived here yesterday, that Dr. W. J. T. Kimber, the Medical Superintendent, was away ill in hospital ; he has our best wishes for a speedy and complete recovery.

Dr. E. D. T. Roberts, the Deputy Medical Superintendent, and other members of the medical staff, have given us every assistance during our visit, and we desire to express our thanks to them. We have seen, we believe, all the patients in residence, and we have found them on the whole as happy and contented as their respective mental conditions allow. We received few complaints, and none, we believe, which had any reasonable basis, while we believe that the relationship subsisting between the patients and the medical and nursing staffs is good. We gave a number of private interviews. Patients' clothing is fairly good, but certain articles of under-clothing issued to the women—*e.g.*, the knickers, petticoats, and nightdresses—are not of the type generally worn to-day, and should be replaced by garments of more modern design and lighter material. With regard to the men, we are sure that an issue of flannel trousers, tweed coats and knitted pullovers to the younger patients would be much appreciated by them. Few, if any, of them will have been accustomed, before they entered the Hospital, to wearing heavy tweed suits.

We understand that while patients in possession of suitable outer clothing are allowed to retain and wear it, this concession does not apply to undergarments. We think that the privilege should be extended to patients in possession of suitable underclothing, and we feel sure that there can be no insuperable difficulties, either in the laundry or elsewhere, to the adoption of this desirable course.

At present, both linen and clothing are ink-marked by means of a stamp ; this method is both disfiguring and uneconomical, since the ink rots the fabric, and we much hope



that the Committee will feel able to provide a machine for marking all articles with thread.

Occupation therapy in this Hospital is, we feel, organised on sound lines, the main object of treatment being to improve the patients to a stage where they can be usefully employed in and about the Institution. There are still a large number of more regressed patients apparently totally unemployed, and we think that more could be done to provide some simple work for these in the wards. There are, on the male side, one large and one small occupation room, the latter for patients of more introverted type, while for the women there is a large occupation room and a large sewing room. On this side, we were glad to hear that another room for patients of the more degraded type is shortly to be provided.

A number of patients find employment all day in one or other of the occupation rooms, and it is not clear to us that these men and women get regular daily exercise in the open air. It is essential, in our view, that all these patients should be out for a part of each day, and if that is not the case at present, we hope that the existing arrangements will be modified.

Recreation receives a good deal of attention, and dances and other entertainments are given in the Visiting Hall frequently ; entertainments of one kind or another are given also from time to time in the wards.

The Hospital is still, however, without kinematograph apparatus. Whatever personal views may be held regarding the entertainment value of " pictures," the fact remains that they provide by far the most popular form of entertainment available to the public to-day, and we know that the " picture shows " which are provided in all but very few mental hospitals are appreciated and enjoyed by the patients far more than are any other entertainments or amusements. We much hope that before long this Hospital also, will be equipped with the requisite apparatus.

There are wireless sets of an excellent pattern in many wards, and we understand that these sets are passed round from ward to ward. We consider however, that a set for each ward is necessary, so that the programmes may be enjoyed at the discretion of the nurse in charge of the ward, when the patients desire it, and not merely when a radio set happens to be available.

Working patients are rewarded by the issue to them of

“tallies,” which can be exchanged at the canteen for such goods as are stocked there. This method of rewarding and encouraging patients is an admirable one, and the Committee are entitled to congratulation for having brought it into existence. The canteen is, we make no doubt, a source of much pleasure to the patients. Sweets, tobacco and cigarettes, and a wide range of tinned fruit, etc., are stocked, but we should have liked to see such fresh fruit as oranges, apples, and bananas, offered for sale, while it is the general experience that where such toilet articles as face powder, face creams, etc., are available, they are readily purchased, and are much appreciated by the female patients upon whom their use has a decided therapeutic effect.

In this connection we are glad to know that before long a hair dressing saloon is to be opened. We trust that the room, which we saw, will be properly and fully equipped for its purpose. We have found the dormitories and day-rooms throughout the Hospital in good order and particularly well kept. The complete redecoration of the wards is now almost completed, and the effect generally is very pleasing. In most wards there is a good supply of plants and flowers, eked out in some cases by artificial blooms. At Highfield Hall we felt that a few pot plants or ferns would, however, be more suitable than the bowls of artificial flowers at present used to decorate the tables. Here also, we recommend that a key, in a glazed box, be placed on the wall by the fire exit door on the first floor.

In some of the better wards in the Hospital individual towels are now provided ; we hope that it may be found possible to extend this practice to at least some of the other wards.

On the female side there are one or two excellent stands for the storage of clothing ; a supply of these has now been ordered so that every ward on this side may be similarly equipped. Dr. Roberts has promised to look into the question of a supply of similar stands for use on the male side. A pleasant feature of this Hospital is the Club Room, used by patients three times during the week, once by the men, once by the women, and once by the men and women in association. We are sure that this arrangement affords much pleasure to those who are privileged to enjoy it.

There are to-day 1198 patients resident in the Hospital, 426 men and 772 women. Of this total, as many as fifty-one



men and sixty-six women are voluntary patients, but there are only two temporary patients, one of each sex.

During 1937 direct admissions numbered 338, 159 of these cases having been admitted from their own homes. No less than 127 voluntary (46 M. and 81 F.), patients were admitted and there were twenty-one admissions of temporary patients—six men and fifteen women. During the same period there were seventeen (10 M. and 7 F.) admissions on transfer.

One hundred and seventy-seven patients (fifty-nine M. and 118 F.) were discharged or left, of whom forty-five (ten M. and thirty-five F. ) voluntary, and forty-six certified (fifteen M. and thirty-one F.), were discharged as recovered.

Seventy-one patients (twenty-one M. and fifty F.) died.

No patients are at present boarded out, and only nine are on long leave or trial.

The weekly average maintenance cost is 27s. 8.8d.

One male villa, two female villas, and two female wards are open to the gardens and grounds, and three female wards are open to the ward gardens only.

The present staff of nurses comprises :—

				M.		F.
Charge	...	...	...	8	...	19
Ordinary	...	...	...	68	...	84
Night	...	...	...	6	...	14

Twenty-six men and thirty-two women are certificated or registered as mental nurses, while eighteen men and twenty-three women have passed the preliminary examination.

Apart from two matters, the patients' dietary is satisfactory, and calls for no special comment. We note however that apparently no regular issue of fresh fruit is made ; our colleagues last year commented on the fact that the breakfasts, compared with the rest of the daily diet, were somewhat deficient in the matter of " extras," and to this we would add that in our view they are extremely monotonous. Few people can look forward with pleasure to precisely the same meal served at precisely the same time every day throughout the year, and we feel sure that, with the exercise of a little ingenuity, more varied breakfasts could be provided without incurring additional expense.



The mortality rate per cent. for the year 1937 was 6.3. Since the visit paid in March last year fourteen male and thirty-nine female patients have died, a total of fifty-three. Post-mortem examinations were made in thirty cases. Thirty-five of the deaths, just over sixty-six per cent., were attributable to heart-disease.

Inquests were held in four cases. Two patients committed suicide while of unsound mind, one of them while away on trial ; one patient was found dead in bed, having apparently died from asphyxia during an epileptic fit ; the fourth patient died as the result of an accidental fall.

Four patients sustained serious, but non-fatal injuries. Three of these were fractures of limbs due to accidental falls, while one of them was a fractured skull from violence by another patient. X-ray examinations were made in all these cases.

The general health of the patients has been extremely satisfactory. Two cases of diphtheria were notified on the female side in May. The Hospital has been entirely free from dysentery and enteric fever, and we found that the general hygienic arrangements in the wards, the laundry, the kitchen, and the farm, etc., adopted to prevent the occurrence of infective disease, were of a satisfactory nature.

We visited the laboratory and were informed of the measures taken to ensure a clean water and milk supply. Here a considerable amount of laboratory work for other institutions is undertaken.

Six patients are reported to be suffering from tuberculosis ; there have been five deaths from this disease.

We visited the treatment centre of the St. Albans Nerve Clinic which is situated at this Hospital. We were interested to hear that suitable cases in the Mental Hospital have the advantage of psycho-therapeutic treatment at the Clinic, and were glad to know that the work of the Clinic is growing rapidly.

N. C. CROFT-COHEN,

H. C. DEVAS,

*Commissioners of the Board of Control.*

## Report of the Church of England Chaplain.

To the Visiting Committee of the Herts C.C., Hill End Hospital.

Ladies and Gentlemen,

I am happy to report that the C. of E. Chaplain's duties have been carried out regularly during the past year, with the help of my colleagues. We have been happy in the work and have sought to minister to the patients with sympathy and earnest desire to be of assistance to them.

I am thankful to believe that in not a few instances our work has resulted in definite spiritual benefit, and in some cases has contributed to recovery of the patient.

Personally I am sorry to be relinquishing my position of Chaplain, which I have held since 1911, owing to my leaving St. Albans on my resignation of my incumbency of St. Paul's. I am glad to say that my colleagues are prepared to carry on the duties as usual after my resignation takes place till the appointment of a new Vicar of the Parish, who, I hope, if offered the chaplaincy by you, will be willing to accept the position.

The attendance of the patients at the Church Services and at the Holy Communion has been well maintained throughout the year at about 250, showing on the whole an upward tendency.

I wish to acknowledge my indebtedness to the Organist and Choir for their reverent and efficient help in the musical part of the Services, which has contributed greatly to their attraction and helpfulness.

Further, I should like to express my thanks for the unfailing readiness on the part of all the Officials and Staff to offer assistance to the Chaplains in carrying out their duties.

I would add a word of praise to those in charge of the Occupational Rooms for the excellent way in which they carry out their duties, and of the extra-ordinarily good work that is often turned out.

With the enlargement of the Buildings the work is making increased demands on the Chaplains.

Church Collections have resulted in the following amounts :—

				£	s.	d.
Patients' Benevolent Fund	...	...	...	1	9	4
St. Albans and Mid Herts Hospital	...	...	...	2	16	1
Church Missionary Society	...	...	...	2	1	0

Your obedient Servant,

(Signed) ALEX. J. BARFF.



## Report of Free Church Chaplain.

SUNDAY SERVICES. I have taken the Services in the Chapel on alternate Sundays in the evening with the occasional help of other local Free Church Ministers. The congregation has been reverent and responsive, entering heartily into the singing of the hymns especially when these have been well known. I have been interested to find from conversation with the patients that they have from time to time raised points in the sermons which show that they have followed the service with intelligence and interest.

WEEK-DAY ACTIVITIES. I have usually visited the Hospital on Tuesday afternoons to take services in the Wards for the older and feebler folk who are not able to get to the Sunday Services in the Chapel. When it has not been convenient to visit the Hospital on Tuesdays I have visited some other afternoon in the week giving the whole time to conversation with individuals. I have found this most valuable not only as enabling me to make the Sunday Services more relevant to the needs of the patients, but also as establishing personal relations through which I hope I have been able to bring comfort and encouragement. I have given first place of course to those dangerously ill, and have also tried to establish contact with new Nonconformist patients in the first weeks of their stay in the Hospital. They seem to appreciate this as a sign of personal interest and care beyond that already given them by the medical and nursing staff.

I have taken the Funeral Service for the Nonconformist Patients who have been buried in the Hospital Cemetery. I should like to say again how much I have been impressed by the reverent way in which the Staff carry through all the arrangements and enter into the service even when there has been no friend of the deceased at the service.

I should like to acknowledge the ready co-operation of the Staff from the Medical Superintendent downwards in this side life of the Hospital. The help of the Organist and Choir is of course, all important for the Sunday services and of the Patients who help in the Ward Services two who are ex-organists give most efficient help at the piano in the accompanying of the hymns.

(Signed) W. MORTON BARWELL.

*May 16th, 1938.*



## Report of the Roman Catholic Chaplain.

During the past year the Roman Catholic Services were held regularly at the Institution—Early Mass, with opportunities for the Sacraments on the first Tuesday and a further monthly service on the third Tuesday in each month. The attendance of Patients and Staff thereat was satisfactory.

The Catholic patients were further visited in the Wards periodically. All sick calls were duly notified to us and received immediate attention.

We wish to record our sincere thanks to the R.M.S. and the Staff for the always courteous assistance given to us in the exercise of our ministry.

(Signed) CHAS. GOUFFE, M.S.C.

*May 12th, 1938.*

*Rector.*



*Statistical Tables.*



TABLE I.

Year * or group of Years.	ADMISSIONS IN EACH YEAR.*										DISCHARGES IN EACH YEAR.*						DEATHS IN EACH YEAR.*		Remaining on Register on the last day of each Year.*																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	Direct.					Indirect.		TOTAL ADMISSIONS.			Recovered.		Relieved.		Not Improved.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	Acquired Insanity.		Congenital Cases.		Total direct Admissions	M.	F.	M.	F.	T.	M.	F.	M.	F.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
	1st Attack Cases.	Not 1st Att. and others	M.	F.	M.													F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
																														M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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Up to 1930, Not 1st attack cases included a number of 1st attack cases who had been under certificate before. After this date, Not 1st attack cases and those where the number of the attack is unknown only are included.

TABLE II.

Total Cases from the Opening of the Hospital (April 7th 1899) to December 31st, 1937.																				
CASES.			DIRECT ADMISSIONS.										INDIRECT ADMISSIONS (Transfers, &c.)			TOTAL ADMISSIONS (Direct and Indirect).				
Indirect Admissions	Direct Admissions	First admitted in 1899. " " 1901.	1st Attack Cases.			Not 1st Attack and others.			Congenital Cases.			Total direct Admissions.			M.	F.	T.			
			M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
Admitted .....			1729	2298	4027	624	998	1622	186	200	386	2539	3496	6035	767	803	1570	3306	4299	7605
Discharged Recovered . . . . .			516	733	1249	265	459	724	—	1	1	781	1193	1974	39	52	91	820	1245	2065
(Percentage of Recoveries on Admissions)					31.0			44.6			.26			32.7			5.8			27.1
Discharged Relieved . . . . .			127	246	373	45	101	146	17	24	41	189	371	560	24	38	62	213	469	622
Discharged Not Improved . . . .			207	198	405	81	98	179	67	80	147	355	376	731	390	358	748	745	734	1479
Died .....			654	702	1356	119	160	279	78	57	135	851	919	1770	259	217	476	1110	1136	2246
(Percentage of Deaths on Admissions)					33.6			17.2			34.9			29.3			30.3			29.5
Total Discharged and Died.....			1504	1879	3383	510	818	1328	162	162	324	2176	2859	5035	712	665	1377	2888	3524	6412
Remaining on Dec. 31st, 1937..			225	419	644	114	180	294	24	38	62	363	637	1000	55	138	193	418	775	1193



TABLE III.

FORMS OF MENTAL DISORDER AND SCHEDULE NUMBERS.						Mental Disorders on Admission among the Direct Admissions in 1937.						
						First Attack Cases.		Not First Attack, Congenital and others.		Total.		
						M.	F.	M.	F.	M.	F.	T.
CONGENITAL OR INFANTILE MENTAL DEFICIENCY (Idiocy or Imbecility)												
I.	1.	Intellectual—										
		(a) with Epilepsy ... ..				.	.	.	4	.	4	4
		(b) without Epilepsy ... ..				.	.	1	5	1	5	6
I.	2.	Moral . . . . .				.	.	.	.	.	.	.
INSANITY OCCURRING LATER IN LIFE.												
II.	1.	Insanity with Epilepsy . . . . .				3	.	.	.	3	.	3
II.	2.	General Paralysis of the Insane . . . . .				4	4	1	.	5	4	9
II.	3.	Insanity with the Grosser Brain Lesions . . . . .				4	1	.	.	4	1	5
II.	4.	Acute Delirium (Acute Delirious Mania) . . . . .				.	.	.	.	.	.	.
II.	5.	Confusional Insanity . . . . .				12	26	.	5	12	31	43
II.	6.	Stupor . . . . .				.	.	.	.	.	.	.
II.	7.	Primary Dementia . . . . .				12	16	5	4	17	20	37
II.	8.	Mania—										
		(a) Recent (under 1 year) . . . . .				1	5	.	3	1	8	9
		(b) Chronic . . . . .				1	.	.	1	1	1	2
		(c) Recurrent . . . . .				.	.	1	2	1	2	3
II.	9.	Melancholia—										
		(a) Recent (under 1 year) . . . . .				20	36	.	7	20	43	63
		(b) Chronic . . . . .				3	16	.	.	3	16	19
		(c) Recurrent . . . . .				.	.	3	24	3	24	27
II.	10.	Alternating Insanity . . . . .				2	6	3	6	5	12	17
II.	11.	Delusional Insanity—										
		(a) Systematised . . . . .				.	1	.	.	.	1	1
		(b) Non-systematised . . . . .				12	11	1	.	13	11	24
II.	12.	Volitional Insanity—										
		(a) Impulse . . . . .				3	3	.	1	3	4	7
		(b) Obsession . . . . .				.	.	.	.	.	.	.
		(c) Doubt . . . . .				.	.	.	.	.	.	.
II.	13.	Moral Insanity . . . . .				.	.	.	.	.	.	.
II.	14.	Dementia—										
		(a) Senile . . . . .				9	18	2	1	11	19	30
		(b) Secondary or Terminal . . . . .				.	2	1	.	1	2	3
II.	15.	Psycho Neurosis . . . . .				13	9	2	2	15	11	26
Totals . . . . .						99	154	20	65	119	219	338



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TABLE IV.

CAUSES AND ASSOCIATED FACTORS OF INSANITY AMONG THE DIRECT ADMISSIONS IN 1937.	AUSES OF INSANITY.			
	PRINCIPAL CAUSE (one entry only in each case).		CONTRIBUTORY or ASSOCIATED FACTORS (All contributory factors ascert'ned)	
	M.		M.	F.
A. HEREDITY ( <i>excl. cousins, nephews, nieces, and offspring</i> ).				
1. Insanity ... ..	3	7	28	47
2. Epilepsy ... ..	1	.	5	4
3. Neuroses ( <i>limited to Hysteria, Neurasthenia, Spasmodic Asthma and Chorea</i> ) ... ..	.	.	.	7
4. Eccentricity ( <i>in marked degree</i> ) ... ..	.	.	2	7
5. Alcoholism ... ..	.	.	20	7
B. MENTAL INSTABILITY, as revealed by—				
1. Moral Deficiency ... ..	.	.	.	.
2. Congenital Mental Defi'cy ( <i>not amounting to imbecility</i> )..	1	1	13	21
3. Eccentricity ... ..	.	.	1	.
C. DEPRIVATION OF SPECIAL SENSE.				
1. Smell and Taste ... ..	.	.	.	.
2. Hearing ... ..	.	.	.	.
3. Sight ... ..	.	.	.	.
D. CRITICAL PERIODS.				
1. Puberty and Adolescence ... ..	.	.	5	6
2. Climacteric ... ..	.	.	2	49
3. Senility ... ..	.	3	2	1
E. CHILD BEARING.				
1. Pregnancy ... ..	.	2	.	1
2. Puerperal State ( <i>not septic</i> ) ... ..	.	6	.	.
3. Lactation ... ..	.	1	.	.
F. MENTAL STRESS.				
1. Sudden ... ..	.	2	.	1
2. Prolonged ... ..	.	2	35	31
G. PHYSIOLOGICAL DEFECTS AND ERRORS,				
1. Malnutrition in early life ( <i>signs of Rickets, etc.</i> )	.	.	.	.
2. Privation and Starvation ... ..	.	.	.	.
3. Over-exertion ( <i>physical</i> ) ... ..	.	.	1	1
4. Masturbation ... ..	.	.	.	.
5. Sexual Excess ... ..	.	.	.	.
H. TOXIC.				
1. Alcohol ... ..	2	2	1	1
2. Drug Habit ( <i>Morphia Cocaine, etc.</i> ) ... ..	1	.	.	.
3. Lead and other such Poisons ... ..	.	.	.	.
4. Tuberculosis ... ..	.	2	.	.
5. Influenza ... ..	4	9	13	2
6. Puerperal Sepsis ... ..	.	.	.	.
7. Other Specific Fevers ... ..	.	.	.	.
8. Syphilis, acquired ( <i>all known to have had Syphilis</i> ) ...	6	4	6	1
9. „ congenital ( do. do. ) ... ..	.	.	.	.
10. Other Toxins ... ..	1	.	8	8
I. TRAUMATIC.				
1. Injuries ... ..	1	.	8	1
2. Operations ... ..	.	4	.	1
3. Sunstroke ... ..	.	.	2	.
K. DISEASES OF THE NERVOUS SYSTEM.				
1. Lesions of Brain ... ..	3	3	1	.
2. „ of Spinal Cord and Nerves ... ..	2	.	.	.
3. Epilepsy ... ..	1	3	.	.
4. Other Defined Neuroses ( <i>limited as in A. 3</i> ) ... ..	.	.	.	.
5. Other Neuroses in Infancy and Childhood ( <i>limited to Convulsions and Night Terrors</i> ) ... ..	.	.	.	.
L. OTHER BODILY AFFECTIONS.				
1. Hæmopoietic System ( <i>Anæmia, etc.</i> ) ... ..	.	.	.	1
2. Cardio-vascular Degeneration ... ..	12	25	4	11
3. Valvular Heart Disease ... ..	1	.	.	.
4. Respiratory Organs ( <i>excluding Tuberculosis</i> ) ... ..	.	.	.	.
5. Gastro-intestinal System ... ..	.	2	.	.
6. Renal and Vesical System ... ..	.	6	.	.
7. Generative System ( <i>excluding Syphilis</i> ) ... ..	.	1	.	.
8. Other General Affections not above included ( <i>e.g., Diabetes, Myxædema, etc.</i> ) ... ..	.	4	.	1
A. to L. TOTAL OF PRINCIPAL FACTORS ... ..	39	89		
M. INSTANCES IN WHICH NO PRINCIPAL FACTOR WAS ASSIGNED but in which one or more factors were returned as contributory ... ..	78	121		
N. NO FACTOR ASSIGNABLE ( <i>notwithstanding full history and observation</i> ) ... ..	1	5		
O. NO FACTOR ASCERTAINED ( <i>history defective</i> ) ... ..	1	4		
TOTAL DIRECT ADMISSIONS ... ..	119	219		

TABLE V

CAUSES OF THE DEATHS IN 1937.	PRIMARY (Principal). One cause only in each death.		No. of P.M.'s.	SECONDARY (Contributory). Number of Occurrences.		TOTAL INCIDENCE of the CAUSES.			Associated or more Specified Conditions, stating Sex and Age.
	M.	F.		M	F.	M.	F.	T.	
<b>I.—GENERAL DISEASES.</b>									
Pulmonary Tuberculosis ...	2	5	4	1	.	3	5	8	Stomach, M. 71 „ F. 74 Oesophagus, M. (about) 73 F. 74
Cancer .....	2	2	3	.	.	2	2	4	
Influenza .....	1	1	.	.	.	1	1	2	
<b>II.—NERVOUS SYSTEM.</b>									
Cerebral Hæmorrhage and Thrombosis .....	.	1	.	.	.	.	1	1	
Epilepsy .....	.	.	.	1	1	1	1	2	
Paralysis Agitans .....	.	.	.	.	1	.	1	1	
<b>III.—CIRCULATORY SYSTEM.</b>									
Degenerative Heart Disease	11	32	21	2	5	13	37	50	
Pericarditis .....	.	1	1	.	.	.	1	1	
Arterio Sclerosis .....	1	.	1	.	.	1	.	1	
<b>IV.—RESPIRATORY SYSTEM.</b>									
Lobar Pneumonia .....	2	1	2	.	.	2	1	3	
Broncho-Pneumonia .....	.	.	.	.	1	.	1	1	
Congestion of Lungs .....	.	.	.	1	5	1	5	6	
<b>V.—EXCRETORY SYSTEM.</b>									
Chronic Renal Disease .....	.	2	.	.	.	.	2	2	
<b>VI.—DIGESTIVE SYSTEM.</b>									
Peritonitis .....	.	.	.	.	.	.	.	.	
Strangulated Hernia .....	1	.	1	.	.	1	.	1	
Cirrhosis of Liver .....	.	1	1	.	.	.	1	1	
Perforated Gastric Ulcer...	.	1	1	.	.	.	1	1	
<b>VII.—VIOLENCE.</b>									
Suicide by Poison .....	.	1	1	.	.	.	1	1	
„ „ Drowning .....	.	1	.	.	.	.	1	1	
Asphyxia from Suffocation	1	.	1	.	.	1	.	1	
Fractured Femur .....	.	1	1	.	.	.	1	1	
<b>TOTAL DEATHS AND P.M.'s..</b>	21	50	38	Average Age at Death :					
				M. 67·3. F., 6·37; Total, 64·9.					



TABLE VI.

Year * or Group of Years.	Average Daily Numbers on Register.			Number of Deaths in each year, or Average Number in each Group of Years.			Percentages of Deaths on the Average Daily Num- bers in each year.*		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
<i>Average</i> 1901-05.	260	313	573	20.2	15.8	36	7.77	5.05	6.28
1906-10	310	370	680	27.6	21.4	49	8.90	5.78	7.20
1911-15.	378.6	472.2	850.8	33.4	27.6	61	8.32	5.84	7.16
<i>Average</i> 1916-20.	373.8	486.8	860.6	57.4	42	99.4	15.35	8.62	11.55
<i>Average</i> 1921-25.	341.7	516.4	857.6	25.2	30.6	55.8	7.38	5.92	6.51
1926	367	563	930	25	26	51	6.81	4.62	5.48
1927	359	582	941	21	18	39	5.85	3.09	4.15
1928	289	587	876	30	33	63	10.38	5.62	7.19
1929	288	588	876	28	43	71	9.72	7.31	8.11
1930	297	617	914	18	27	45	6.06	7.31	4.92
1931	319	640	959	22	37	59	6.89	5.78	6.10
1932	341	658	999	21	45	66	6.18	6.84	6.60
1933	350	682	1032	15	37	52	4.28	5.42	5.36
1934	357	668	1025	25	41	66	6.99	6.13	6.37
1935	362	672	1034	28	43	71	7.73	6.40	6.86
1936	370	695	1065	29	47	76	7.83	6.76	7.13
1937	392	745	1137	21	50	71	5.35	6.71	6.24

TABLE VII.

ADMISSIONS IN 1937.				Hill End.		Arlesey.		Total.		
				M.	F.	M.	F.	M.	F.	T.
Direct Admissions—										
1st Attack Cases	..	..	..	99	154	13	13	112	167	279
Not 1st Attack and unknown	..			19	56	3	3	22	59	81
Congenital Cases	..	..	..	1	9	..	..	1	9	10
Total Direct Admissions	..	..	..	119	219	16	16	135	235	370
Indirect Admissions	..	..	..	10	7	..	1	10	8	18
Total Admissions	..	..	..	129	226	16	17	145	243	388



TABLE VIII.

*Numbers of Patients on the Registers at Hill End and Arlesey belonging to each Area in Hertfordshire on December 31st, 1937.*

AREAS.	Numbers at Hill End.		Numbers at Arlesey.		Total.		
	M.	F.	M.	F.	M.	F.	T.
Barnet .. ..	69	137	6	3	75	140	215
Bishop's Stortford	19	40	11	11	30	51	81
Dacorum ..	50	84	3	2	53	86	139
East Herts ..	45	123	27	9	72	132	204
Hitchin .. ..	..	6	50	77	50	83	133
St. Albans ..	76	123	4	3	80	126	206
Watford .. ..	105	205	6	1	111	206	317
Herts County ..	..	..	5	1	5	1	6
Total ..	364	718	112	107	476	825	1301

*Annual Accounts.*

## PART I. MAINTENANCE

Year end

*Expenditure.*

	£	s.	d.	£	s.	d.
To Salaries and Wages—						
Medical Staff .. .. .	5845	17	1			
Nursing Staff .. .. .	24391	16	0			
Other Staff (excluding Laundry, Farm and Garden Staffs) .. .. .	9299	5	2			
Superannuation Allowances, etc., under the Asylums Officers' Super- annuation Act, 1909 .. .. .	5559	3	3			
National Health, Pensions, and Un- employment Insurance : Employer's Contributions .. .. .	255	8	10			
				<hr/>		
,, Provisions (including Farm and Garden supplies) for Patients and Staff ..					45351	10    4
,, Clothing—Patients .. .. .	2341	6	4			
Staff .. .. .	552	16	7			
				<hr/>		
,, Drugs and Medical & Surgical Ap- pliances .. .. .					16518	18    5
,, House Coal and Laundry .. .. .						
,, Joint Services—					2894	2    11
Steam .. .. .	6967	11	4			
Water .. .. .	828	5	11			
Electricity .. .. .	927	7	10			
Sewage Disposal .. .. .	433	1	7			
				<hr/>	9156	6    8
,, Domestic Renewals, Repairs and Additions (Furniture, Bedding, etc.)					3311	1    5
,, Ambulance and other Transport ..					325	9    0
,, Rent, Rates, Taxes and Insurance ..					5911	5    4
,, Funeral and Removal Expenses and Allowances.. .. .					76	9    1
,, Garden, Ornamental (see page 63) ..					2153	19   10
,, Miscellaneous—						
Printing and Stationery, etc. ..	1414	7	10			
Sundries .. .. .	2606	4	8			
Bank Interest .. .. .	239	7	6			
				<hr/>	4260	0    0
,, Transfers to Building and Repairs Fund Account, being excess of weekly charge on Out-County and other Patients .. .. .					1701	9    8
,, Farm and Garden Account—						
Farm—excess of expenditure over income .. .. .	313	8	5			
Garden— do. .. .. .	405	2	1			
				<hr/>	718	10    6
					<hr/> <hr/>	
					£96560	19   10



## ACCOUNT.

t March, 1938.

	<i>Income.</i>	£	s.	d.	£	s.	d.
<b>By Maintenance of Patients—</b>							
Contributory Counties or Boroughs—							
Hertfordshire County .. ..	77558	9	2				
Other Counties .. ..	1676	16	11				
Private Patients .. ..	5906	17	9				
Service and ex-Service Patients ..	3095	13	0				
Criminal Patients .. ..	112	2	4				
					88349	19	2
<b>„ Funeral and Removal Expenses and Allowances—</b>							
Contributory Counties or Boroughs—							
Hertfordshire County .. ..	522	12	11				
Other Counties .. ..	23	0	3				
Private Patients .. ..	13	8	5				
Service and ex-Service Patients ..	239	7	0				
					798	8	7
<b>„ Superannuation under Asylums Officers' Superannuation Act, 1909—</b>							
Contributions from Staff .. ..	1540	7	10				
Do. from other Mental Hospitals .. ..	125	13	8				
					1666	1	6
<b>„ Staff—</b>							
Deductions for Board, Lodging and Washing, etc. .. ..					1835	17	4
<b>„ Sundry Income—</b>							
Electricity, Water and Gas supplied	179	9	2				
Training School Fees .. ..	153	6	0				
Pathological Specimens examined ..	1462	6	5				
Fees received for Medical Certificates, etc. .. ..	17	17	0				
Miscellaneous .. ..	770	17	0				
					2583	15	7
<b>„ Balance, being excess of Expenditure over Income for the year, carried to Balance Sheet (see p. 64) ..</b>					1326	17	8

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£96560 19 10

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## PART II. BUILDING AND

Year ended

*Expenditure.*

	£	s.	d.	£	s.	d.
To New Buildings and Extraordinary Outlay (voted by County Council) ..				10897	6	6
„ Additions, Alterations, and Improvements, (under £400) .. ..				54	14	3
„ Renewals and Repairs, etc:—						
Salaries and Wages .. ..	7988	18	8			
Materials, etc., .. ..	5838	2	7			
Proportion Joint Services Repairs ..	232	5	2			
				14059	6	5
„ Other Expenditure:—						
Superannuation allowances .. ..	50	6	5			
National Health, Pensions and Unemployment Insurance: Employer's contributions .. ..	140	10	7			
				190	17	0
„ Herts County Council:—						
Rents of Cottages occupied by Cell Barnes Staff for year ended 31st March, 1938 (Net) ..				693	16	3
„ Building and Repairs Fund Account—						
Conversion of Highfield Cottage ..	351	3	10			
Engineer's Guarantee Policy ..	1	3	0			
Rates and Taxes:—						
Cell Barnes Staff						
Cottages ..	538	1	3			
Ordinary Repairs do.	146	5	0			
				684	6	3
Staff Tennis Courts and Pavilion ..	70	8	0			
Alterations to A.M.O's Quarters ..	37	11	0			
Do. Medical Superintendent's House ..	180	16	5			
Electricity supply to Home Farm	278	8	9			
Machinery for Engineer's Shop ..	179	18	0			
Salaries and Wages (cleaning up Estate) .. ..	42	19	9			
National Health etc.,—Employer's Contributions (Do.) .. ..	1	3	9			
				1827	18	9
„ Balance being excess of Income over Expenditure for year carried to Balance Sheet (see p. 64) .. ..				789	15	10

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£28513 15 0

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**PAIRS FUND ACCOUNT.***March, 1938**Income.*

	£	s.	d.	£	s.	d.
By Income from the County of Hertfordshire in respect of:—						
New Buildings and Extraordinary Outlay .. .. .				10897	6	6
Additions, Alterations, and Improvements (under £400) ..				54	14	3
Renewals and Repairs, etc. ..				14155	4	6
„ Superannuation under Asylums Officers' Superannuation Act, 1909 :—						
Contributions from Staff ..				95	5	7
„ Staff :—						
Deductions for Board, Lodging, and Washing, etc, .. ..				362	18	6
„ Sundry Income —						
Rents of Cottages occupied by Cell						
Barnes Staff .. .. .	1231	17	6			
Miscellaneous .. .. .	14	18	6			
				1246	16	0
„ Transfers from Maintenance Account						
being excess of weekly charge on Out-County and other patients ..				1701	9	8

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£28513 15 0

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*Expenditure.*

## 1. FARM

	£	s.	d.	£	s.	d.
To Stock at beginning of year .. ..				6351	19	3
Binder Twine, etc. .. ..	20	16	4			
Bone Crushing, Disinfectants, Lime, etc,	27	9	11			
Carriage Charges & Travelling Expenses						
etc. .. ..	24	15	5			
Electricity .. ..	8	9	10			
Gun and Carriage Licences, Cartridges,						
etc, .. ..	1	10	0			
Harness and Repairs to same .. ..	6	19	10			
Insurance Premiums on Live and Dead						
Stock and Crops .. ..	27	9	10			
Purchase of Live Stock .. ..	926	14	5			
Machine Hire, Threshing, etc. .. ..	46	6	7			
Machinery, Implements, etc. .. ..	165	3	9			
Manure .. ..	1	4	0			
Milk .. ..	452	11	7			
Provender, Middlings, etc. .. ..	1811	12	5			
Rates, Taxes, etc. .. ..	161	2	9			
Rent of Land, etc. .. ..	3	19	9			
Seeds and Plants, .. ..	293	18	4			
Shoeing and Smith's Work .. ..	61	13	2			
Subscription to Herts Milk Recording						
Society, etc. .. ..	29	19	2			
Tractor Oil, etc. .. ..	51	3	5			
Veterinary Services, Supplies and Appli-						
ances, etc, .. ..	29	19	8			
Other Expenses.. ..	1	5	0			
„ Labour (not including patients' labour)	2553	3	0			
				6707	8	2
„ Excess of Income over Expenditure for						
the year .. ..						

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£13059 7 5

## 2. GARDEN.

	£	s.	d.	£	s.	d.	£	s.	d.
	Ornamental.			Kitchen.					
To Stock at beginning of year							328	1	2
„ Bone Crushing, Disinfectants,									
Oils, Saucers, etc. 30 9 8	30	9	8	49	15	11			
„ Carriage Charges .. 2 5		2	5		1	1			
„ Gun Licences, Cartridges, etc. 5 0		5	0		5	0			
„ Insurance Premiums .. 1 3 4	1	3	4	1	3	5			
„ Machinery, Implements, etc 122 8 2	122	8	2	43	1	1			
„ Manure .. .. 43 4 8	43	4	8	226	18	1			
„ Petrol, etc. .. .. 29 18 5	29	18	5						
„ Rent, Rates and Taxes .. 16 9 7	16	9	7	16	9	6			
„ Seeds, Plants, etc. ... 59 4 3	59	4	3	50	2	10			
„ Other Expenses .. .. 12 4 5	12	4	5	27	8	7			
	315	9	11	415	5	6			
„ Labour (not including pa-									
tients' labour).. . 1838 9 11	1838	9	11	1005	1	5			
	2153	19	10	1420	6	11	3574	6	9
„ Excess of Income over Expenditure for							£3902	7	11
the year .. ..									
							£3902	7	11

**RDEN ACCOUNT.**

March, 1938.

Income.

**1. FARM.**

	£	s.	d.	£	s.	d.
By Value of Goods Supplied to the Hospital—						
Beef . . . . .			—			
Pork . . . . .	115	11	5			
Heads, Tails, Tongues, etc. . . . .			—			
Poultry . . . . .	45	15	0			
Eggs . . . . .	144	0	7			
Milk . . . . .	2668	16	6			
Potatoes . . . . .	346	17	0			
Veal . . . . .			—			
Guinea Pigs . . . . .	7	0	0			
Plucks and Liver . . . . .	2	18	1			
			—	3330	18	7
Cost of moving Coal and Coke (Joint Services Account) . . . . .	1	13	0			
Cost of Carting (Ordinary Repairs Account) . . . . .			—			
Farm Labour to Cell Barnes Colony . . . . .	118	3	4			
„ Sale of Stock, etc.—						
Bullocks, . . . . .			—			
Heifers, . . . . .	53	0	0			
Cockerels . . . . .	9	18	1			
Cows and Calves . . . . .	385	17	10			
Horses and Cows (dead) . . . . .	7	0	0			
Sheep . . . . .	158	13	7			
Pigs, . . . . .	1108	7	5			
do. Guinea . . . . .			—			
Potatoes . . . . .			—			
Shooting Rents . . . . .	25	0	0			
Wheat, (including Deficiency Payments) . . . . .	221	1	5			
Milk, Eggs, etc. . . . .	1531	16	4			
Other Income . . . . .	3	8	1			
			—	3623	19	1
„ Stock at end of year . . . . .				5791	1	4
„ Excess of Expenditure over Income for the year . . . . .				313	8	5
				£13059	7	5

**2. GARDEN.**

	£	s.	d.	£	s.	d.
By Value of Goods supplied to the Hospital—						
Vegetables . . . . .	758	2	6			
Fruit . . . . .	177	7	9			
„ Sundry Sales . . . . .			—			
			—	985	10	3
„ Stock at end of year . . . . .				407	15	9
				1343	6	0
„ Transfer to Maintenance Account—						
Expenditure upon Ornamental Gardens (see p. 58) . . . . .				2153	19	10
				3497	5	10
„ Excess of Expenditure over Income for the year . . . . .				405	2	1

£3902 7 11

										<i>Liabilities</i>					
										£	s.	d.	£	s.	d.
<b>To Sundry Creditors—</b>															
Invoice Account	..	..	..	..	..	..	..	..	..	2918	10	0			
Salaries and Wages	..	..	..	..	..	..	..	..	..	944	4	1			
Private Patients	..	..	..	..	..	..	..	..	..	367	6	0			
Miscellaneous	..	..	..	..	..	..	..	..	..	187	10	3			
Herts County Council for Deposits on account of New Buildings and Extraordinary Outlay	..	..	..	..	..	..	..	..	..	5591	9	11			
Do. Rent of Cell Barnes Cottages, 1937/38	..	..	..	..	..	..	..	..	..	693	16	3			
										<hr/>			10702	16	6
<b>„ Income and Expenditure Accounts:—</b>															
<b>Maintenance Account</b>															
Balance as per last Balance Sheet	..	..	..	..	..	..	..	..	..	22090	15	0			
Less Excess of Expenditure over Income for the year 1937-38 (see page 59)	..	..	..	..	..	..	..	..	..	1326	17	8			
										<hr/>			20763	17	4
<b>„ Building and Repairs Fund Account—</b>															
Balance as per last Balance Sheet	..	..	..	..	..	..	..	..	..	8160	8	7			
Less H.C.C. Rent of Cell Barnes Cottages 1936/37	..	..	..	..	..	..	..	..	..	982	16	9			
										<hr/>			7177	11	10
Add Excess of Income over Expenditure for the year 1937-38 (see page 60)	..	..	..	..	..	..	..	..	..	789	15	10			
										<hr/>			7967	7	8
<b>„ Cash—Due to Treasurers (overdrawn)</b>													4479	14	7

Examined and found correct,  
W. B. KEEN,  
*Accountant.*

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£43913 16 1

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*Assets.*

	£	s.	d.	£	s.	d.
<b>By Sundry Debtors—</b>						
Maintenance, &c. of Patients ..				20496	1	3
Herts County Council :—						
Building and Repairs Account ..	2548	14	0			
On Account of New Buildings and Extraordinary Outlay ..			—			
Cell Barnes Colony (Joint Services Account) .. ..	1649	12	4			
Patients' Nerve Clinic .. ..	1101	11	2			
Laboratory Account .. ..	435	19	6			
				<hr/>		
					5735	17 0
Other Sundry Debtors .. ..					1062	9 2
					<hr/>	
					27294	7 5
<b>„ Stocks of Materials in hand—</b>						
Provisions .. ..	730	3	3			
Clothing of Patients .. ..	1891	17	1			
do. Staff .. ..	299	5	10			
Fuel, Light, Water and Laundry ..	650	5	6			
Domestic Renewals, &c. .. ..	3027	16	2			
Farm .. ..	5791	1	4			
Garden .. ..	407	15	9			
Coal (Joint Services Account) ..	3595	5	1			
				<hr/>		
					16393	10 0
<b>„ Cash—</b>						
In hands of Controller .. ..					225	18 8

S. E. SHEPPARD,  
Controller.

17th May, 1938.

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£43913 16 1

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## PATIENTS' BENEVOLENT FUND ACCOUNT.

*Year ended 31st March, 1938.*

Receipts.				Payments.			
1937.		£	s. d.	1938.		£	s. d.
Apr. 1.	To Balance in hand brought forward		77 10 5	Mar. 24	By Allowances to — A. M.	2 2 0	
1938.				1937.			
Mar. 31.	„ Collections in Hall Box of Hospital, from 1st April, 1937. to 31st Mar., 1938	1 10 0		May 29	L. G.	1 0 0	
1937-1938	„ Offertories at Hospital Church—			July 27	N. F.	1 0 0	
	Easter Sunday ...	11 5		„ 27	M. B.	2 17 0	
	Whit Sunday ...	11 1		Aug. 17	S. M.	15 0	
	Christmas Day ...	6 10		„ 24	F. E. N.	1 0 0	
		1 9 4		Oct. 27	E. C. M.	2 0 0	
1937.	„ Donations from			„ 28	E. M. J.	2 10 0	
May 29.	W. Geard, Esq.	1 15 3		Nov. 17	V. L.	5 0 0	
Aug. 20.	London School of Economics	2 2 0		1938.			
Sep. 30.	D. Thackham, Esq. ...	10 0		Jan. 31	A. P.	2 0 0	
Oct. 27.	H. M. Bate, Esq.	5 5 0		Feb. 9	J. S. B.	10 0	
Dec. 15.	H. M. Bate, Esq.	10 6		„ 14	D. A.	2 6	
1938.				Mar. 22	W. R.	1 0 0	
Jan. 20.	H. M. Bate, Esq.	10 0				21 16 6	
1937-1938.		10 12 9		1937			
	„ Bank Interest ...	2 0 0		Nov. 6	„ W. & M.—		
					Repairs to Spectacles ...		2 3
				May 11	„ Subscription to British Red Cross Society		2 2 0
				Jun. 29	„ Donation to Mental After-Care Association .. .. .		1 1 0
				1938			
				Feb. 3	Cheque Book		10 0
							25 11 9
					„ Balance ... .. .		67 10 9
							£93 2 6
			£93 2 6				

## PATIENTS' PROPERTY FUND ACCOUNT.

*Year ended 31st March, 1938.*

<b>1937.</b>	<i>Receipts.</i>	£ s. d.
<b>April 1.</b>	To Balance in hand brought forward... ..	412 11 10
<b>1938.</b>		
<b>Mar. 31.</b>	,, Amounts received during the year, being moneys found upon or belonging to Patients ... .	600 4 2
		£1012 16 0

<b>1938.</b>	<i>Payments.</i>	£ s. d.
<b>Mar. 31.</b>	By Amounts refunded to or on account of Patients during the year ... ..	562 5 10
	,, Amount refunded to the Official Solicitor on account of Harriet J. S. ... ..	6 10 0
	,, Balance of cash belonging to Charles W. W. ... ..	3 0 0
	,, Balance of Cash belonging to Lilian M. D. ... ..	3 7 6
<b>1938</b>		
<b>Mar. 31.</b>	,, Balance ... ..	437 12 8
		£1012 16 0

Examined and found correct,  
W. B. KEEN,  
*Accountant.*

S. E. SHEPPARD,  
Controller.  
12th May, 1938.

HILL END HOSPITAL AND CLINIC.

STATEMENT AS TO AVERAGE WEEKLY COST OF MAINTENANCE.

ACCOUNT.	Year ended 31st March, 1938.			Year ended 31st March, 1937.			Year ended 31st March, 1936.		
	Expenditure.		Average weekly cost per head.	Expenditure.		Average weekly cost per head.	Expenditure.		Average weekly cost per head.
	£	s. d.	s. d.	£	s. d.	s. d.	£	s. d.	s. d.
Salaries and Wages—									
Medical Staff ...	5845	17 1	1 11.2	5398	6 7	1 11.0	5259	3 10	1 11.3
Nursing Staff ...	24391	16 0	8 0.9	22024	14 7	7 10.0	21312	5 11	7 10.2
Other Staff ...	9299	5 2	3 0.9	8825	3 3	3 1.6	8284	17 9	3 0.6
Superannuation Allowances ...	5559	3 3	1 10.1	5310	0 11	1 10.7	4804	0 8	1 9.3
National Insurances—Employer's Contributions ...	255	8 10	1.0	255	3 5	1.1	262	16 7	1.2
Provisions for Patients and Staff ...	£45351	10 4	15 0.1	£41813	8 9	14 10.4	£39923	4 9	14 8.6
Clothing—Patients ...	16518	18 5	5 5.5	14476	3 3	5 1.8	13686	15 3	5 0.5
Do. Staff ...	2341	6 4	9.3	1468	19 4	6.3	1566	15 5	6.9
Drugs, etc. ...	552	16 7	2.2	306	12 4	1.4	388	12 11	1.7
House Coal, Laundry & Cleaning Materials	911	15 10	3.6	823	3 5	3.5	608	18 4	2.7
Joint Services with Cell Barnes—Hill End	3270	0 10	1 0.9	2836	9 10	1 0.2	2831	5 4	1 0.5
Proportion ...	9156	6 8	3 0.4	8665	11 11	3 1.0	7910	1 11	2 11.0
Domestic Renewals ...	3311	1 5	1 1.1	2759	19 3	11.4	3105	14 2	1 1.7
Ambulance and other Transport ...	325	9 0	1.3	154	15 6	0.7	148	9 6	0.7
Rates, Taxes and Insurance ...	5911	5 4	1 11.5	5979	3 6	2 1.5	4738	13 2	1 9.0
Funerals and Removals ...	76	9 1	0.3	75	5 4	0.3	70	5 5	0.3
Farm and Garden Account ...	718	10 6	2.9	—	—	—	—	—	—
Ornamental Garden Account ...	2153	19 10	8.6	1355	15 6	5.8	840	16 10	3.7
Miscellaneous ...	4020	12 6	1 4.0	3414	6 2	1 2.6	3047	1 3	1 1.5
	£94620	2 8	31 3.7	£84129	14 1	29 10.9	£78866	14 3	29 0.8
Deduct Income —									
Superannuation Deductions ...	1666	1 6	6.6	1537	18 5	6.6	1442	16 3	6.4
Board, Lodging and Washing ...	1835	17 4	7.3	1608	2 3	6.8	1063	2 6	4.7
Surplus on Farm and Garden Account	—	—	—	459	6 0	1.9	1102	13 4	4.9
Miscellaneous ...	3472	13 9	1 1.8	3050	2 7	1 1.1	2775	7 10	1 0.2
	£6974	12 7	2 3.7	£6655	9 3	2 4.4	£6383	19 11	2 4.2
TOTAL	£87645	10 1	29 0.0	£77474	4 10	27 6.5	£72482	14 4	26 8.6
Average Daily Number of Patients ...	... ..	1159	...	... ..	1079	...	... ..	1042	...







